

## Theme 2: Strengthening Medicaid, State Children's Health Insurance Program (SCHIP), and State Programs

**Summary:** The Medicaid population is predominately children and their families. However, the elderly and individuals with disabilities, who make up slightly less than one-third of the Medicaid population, account for more than two-thirds of program expenditures. Beneficiaries eligible for both Medicare and Medicaid constitute one of the most vulnerable populations in either program. They include a disproportionate share of the frail elderly and nonelderly individuals with severe mental and physical disabilities. CMS is working to improve the Medicaid programs by promoting flexibility. Demonstration waiver authority offers States opportunities for additional flexibility. More than half of the States are operating demonstration projects; several are testing innovative approaches to health care delivery, and others are using the demonstration projects to expand eligibility to cover the uninsured and childless adults.

### Arizona Health Care Cost Containment System

**Project No:** 11-WV-00032/09  
**Project Officer:** Joan Peterson  
**Period:** October, 1982 to September, 2006  
**Funding:** \$0  
**Principal Investigator:** Anthony Rodgers  
**Award:** Waiver-Only Project  
**Awardee:** Arizona Health Care Cost Containment System  
 801 East Jefferson  
 Phoenix, AZ 85034

**Description:** The Arizona Health Care Cost Containment System began operation on October 1, 1982, and initially covered only acute-care services. The Arizona Long-Term Care System component was implemented in 1988. A phase-in of comprehensive behavioral health services began in 1990 and was completed in 1995. The demonstration has been extended on several occasions, most recently through September 30, 2006. On January 18, 2001, CMS approved an expansion to increase eligibility for the acute care program to 100 percent of the Federal poverty level (FPL). This expansion was phased in beginning April 1, 2001, and had added almost 125,000 enrollees through October 1, 2003. In addition, Arizona received approval of an amendment under the Health Insurance Flexibility and Accountability initiative on December 12, 2001. This amendment covers single adults and childless couples with income at or below 100 percent FPL and parents of Medicaid and State Children's Health Insurance Program children with income between 100 percent and 200 percent FPL. Approximately 910,000 persons are currently enrolled in the program.

**Status:** The demonstration is approved through September 30, 2006. Approximately 910,000 persons are currently enrolled in the program. ■

### Arkansas 1115

**Project No:** 11-WV-00116/06  
**Project Officer:** Marguerite Schervish  
**Period:** October, 1998 to November, 2006  
**Funding:** \$0  
**Principal Investigator:** Deborah Ellis  
**Award:** Waiver-Only Project  
**Awardee:** Arkansas Department of Human Services  
 329 Donaghey Plaza South  
 PO Box 1437  
 Little Rock, AR 72203

**Description:** The National Cash and Counseling Demonstration is an innovative model of consumer-direction in the planning, selection, and management of community-based personal care and related health services. Consumers have a monthly cash allowance they use to purchase the assistance they require to perform activities of daily living. The Cash and Counseling Demonstration and Evaluation is occurring in three States—Arkansas, Florida, and New Jersey—under the section 1115 demonstration authority of the Social Security Act. Under the initial design of the program, participants are assigned to a treatment group or a control group. Beneficiaries selected for the treatment group received cash allowances, which they used to select and purchase the personal assistance services (PAS) that met their needs. Fiscal and counseling intermediary services are available to those members of the treatment group who wish to utilize them. Individuals assigned to the control group received PAS services from traditional Medicaid providers, with the State making all vendor payments. Other partners in this collaborative effort include the Robert Wood Johnson Foundation, which funded the development of these projects; the Office of the Assistant Secretary for Planning and Evaluation within the Department of Health and Human Services,

which is funding the evaluation; the National Program Office at Boston College, which is performing various coordinating functions; the University of Maryland's Center on Aging, which is conducting ethnographic studies; and the National Council on Aging, which has served in an advisory capacity. An evaluation contract has been awarded to Mathematica Policy Research, Inc. It is assessing differential outcomes with respect to cost, quality, and client satisfaction between traditional PAS services and alternative choice modalities.

**Status:** CMS approved the Arkansas Independent Choices demonstration on October 9, 1998, and implementation began December 1, 1998. Enrollment and random assignment began in December 1998 and continued until the evaluation target of 2,000 enrollees in April 2001 was met. CMS approved an amendment to the program on October 2, 2002. The amendment allowed Arkansas to end randomization and to extend the program for 3 years. The program is scheduled to expire on November 30, 2006. Participants in the control group have been given the opportunity to enroll in the treatment group. Current participation is about 930. ■

#### Arkansas TEFRA-like Demonstration

**Project No:** 11-W-00163/06  
**Project Officer:** Melissa Harris  
**Period:** January, 2003 to December, 2007  
**Funding:** \$0  
**Principal Investigator:** Carolyn Patrick  
**Award:** 1115 Demonstration  
**Awardee:** Arkansas Department of Human Services  
 329 Donaghey Plaza South  
 PO Box 1437  
 Little Rock, AR 72203

**Description:** Demonstration removed the optional TEFRA group from the State Medicaid Plan and placed them into this 1115. The same services are provided, with a premium implemented based on a sliding scale dependent upon parental income. Federal funds will provide match for demonstration-related expenditures, subject to a budget neutrality ceiling.

**Status:** Demonstration is continuing operations. State is submitting quarterly progress reports. CMS is providing technical assistance as needed. ■

#### ARKids B

**Project No:** 11-W-00115/06  
**Project Officer:** Joan Peterson  
**Period:** September, 1997 to September, 2005  
**Funding:** \$0  
**Principal Investigator:** Roy Jeffus  
**Award:** Waiver-Only Project  
**Awardee:** Arkansas Department of Human Services  
 329 Donaghey Plaza South  
 PO Box 1437  
 Little Rock, AR 72203

**Description:** The ARKids B demonstration expands eligibility to currently uninsured children through age 18 with family income at or below 200 percent of the Federal poverty level (FPL). The objectives of the demonstration are to integrate uninsured children into the health care delivery system and to provide benefits comparable to the State Employees and State Teachers insurance program. Arkansas' pre-existing § 1915(b) waiver program, ConnectCare, continues to operate as a separate program, enrolling applicants who meet current Medicaid eligibility requirements. ARKids B operates as a fee-for-service, primary care case management model. It employs the ConnectCare provider network currently in place for the § 1915(b) program.

**Status:** As of December 2003, there were more than 60,000 enrollees. ■

#### Medicaid Demonstration Project for Los Angeles County

**Project No:** 11-W-00076/09  
**Project Officer:** Cheryl Tarver-Eaton  
**Period:** July, 1995 to June, 2005  
**Funding:** \$0  
**Principal Investigator:** Bridgitte Baul  
**Award:** Waiver-Only Project  
**Awardee:** California Department of Health Services  
 1501 Capitol Avenue, Suite 71.6086  
 MS 4000, PO Box 942732  
 Sacramento, CA 94234-7320

**Description:** The original 5-year demonstration was approved in April 1996 for the period July 1, 1995, through June 30, 2000. The demonstration made Federal funds available to the county in order to stabilize its public health system and assist the process of restructuring the county health care delivery system to rely more on primary and outpatient care. The State submitted a 5-year extension proposal to CMS in October of 1999, indicating that the county needed more time to

complete its restructuring efforts. On January 17, 2001, CMS approved a 5-year extension to the demonstration for the period July 1, 2000, through June 30, 2005. The extension is designed to provide \$900 million in Federal financial support to the county in order to allow it to continue its restructuring efforts, provide health services to its indigent population, and provide enhanced clinic reimbursement to clinics participating in the demonstration. In addition, the extension will hold the State accountable for making important changes to eligibility and enrollment policies and procedures and providing training for workers to meet the demands of the restructured system.

On May 2, 2003, the State submitted an amendment to the demonstration to allow for flexible disproportionate share hospital (DSH) payments. Under this proposal, the county would retain its share of DSH payments at its State fiscal year 2001–02 level and would be given the flexibility to use these funds in support of county efforts to sustain the ambulatory care system while it restructures its health care system. The redirected DSH funding would also be used to provide enhanced continuity of care and disease management for those with chronic illness and to establish information systems for computerized clinical data. The amendment would expire on June 30, 2005, marking the end of the 5-year extension period.

**Status:** CMS received notice from the State of California on March 27, 2004 indicating that the State no longer wishes to pursue the DSH Flexibility proposed amendment submitted to CMS on May 2, 2003. ■

### **Oakland Enhanced Enterprise Community (EEC), Community Building Team (CBT) Program**

**Project No:** 11-W-00072/09  
**Project Officer:** Alisa Adamo  
**Period:** February, 1996 to February, 2006  
**Funding:** \$0  
**Principal Investigator:** Eloise Anderson  
**Award:** Waiver-Only Project  
**Awardee:** California Department of Health Services  
 1501 Capitol Avenue, Suite 71.6086  
 MS 4000, PO Box 942732  
 Sacramento, CA 94234-7320

**Description:** The CBT Program is the core of Oakland EEC's empowerment efforts, and the project required various waivers from Administration for Children and Families (ACF) and CMS. The waivers from CMS disregard the project payments to Aid to Families with Dependent Children and Medi-Cal recipients when establishing eligibility or computing grant levels.

**Status:** States were permitted to continue many of the policies that had previously required waivers of pre-welfare reform Title IV-A by submitting a Temporary Assistance for Needy Families plan to the ACF. Unless otherwise indicated, States have elected to retain the waivers and expenditures authorities granted by CMS as part of the welfare reform. ■

### **Model Waiver Evaluation—HIFA**

**Project No:** 500-00-0045/02  
**Project Officer:** Joan Peterson  
**Period:** October 2003 to September, 2008  
**Funding:** \$321,690  
**Principal Investigator:** Terri Coughlin  
**Award:** Task Order  
**Awardee:** Urban Institute  
 2100 M Street, NW  
 Washington, DC 20037

**Description:** The focus of this task order is to address a series of policy questions related to the impacts of the Health Insurance Flexibility and Accountability (HIFA) Initiative and the inter-relationship among HIFA, Medicaid, SCHIP, and employer-sponsored insurance (ESI) for current eligibles and for uninsured individuals.

On August 14, 2001, the President announced the HIFA initiative to States. HIFA is an initiative that is designed to encourage new comprehensive State approaches using section 1115 demonstration authority that will increase the number of individuals with health insurance coverage within current-level Medicaid and SCHIP resources. There is an emphasis on broad statewide approaches that maximize private health insurance coverage options and target Medicaid and SCHIP resources to populations with incomes below 200 percent of the FPL.

When HIFA was proposed and implemented in August 2001, CMS envisioned a program that would provide States with the requisite flexibility and guidance to increase health care coverage in the State. States are required to track systematically the impact of their HIFA demonstration on the uninsured rate for individuals with incomes under 200 percent of the FPL.

The overall goals of the HIFA demonstration initiative are to:

- Encourage innovation to improve how Medicaid and SCHIP funds are used to increase health insurance coverage for low-income individuals.
- Give States the programmatic flexibility required to support approaches that increase private health insurance coverage options.
- Simplify the waiver application process by providing clear guidance and data templates.

- Increase accountability in the State and Federal partnership by ensuring that Medicaid and SCHIP funds are effectively used to increase health insurance coverage, including substantially more private health insurance coverage options.
- Give priority review to State proposals that meet the documented general guidelines of the HIFA demonstration project.

**Status:** Three areas have been proposed for study: the impacts on current enrollees of increased cost sharing and/or reduced benefits under HIFA, the impacts of eligibility expansions on new enrollees, and a study of employers and public-private health insurance initiatives. CMS and the contractor are working together to identify priorities and corresponding States for study. The evaluation will involve a new CMS-sponsored survey, State administrative data, and existing survey data. ■

#### Evaluation of the Development and Early Implementation of Health Insurance Flexibility and Accountability (HIFA) Demonstration Initiative

**Project No:** 500-00-0045/01  
**Project Officer:** Joan Peterson  
**Period:** September, 2002 to September, 2003  
**Funding:** \$353,667  
**Principal Investigator:** Terri Coughlin  
**Award:** Task Order  
**Awardee:** Urban Institute  
 2100 M Street, NW  
 Washington, DC 20037

**Description:** This evaluation will study the impact section 1115 research and demonstration authority has on the process that States go through in order to obtain approval of their demonstrations. Many States have used this authority under Medicaid and the State Children's Health Insurance Program to expand eligibility, thereby reducing the number of uninsured. HIFA provides clear guidelines for States to use 1115 authority and expedite review for States applying for a HIFA demonstration.

**Status:** As of June 21, 2002, two States have projects that have been approved under HIFA and eight States have proposals that are currently being reviewed. All the material for the approved and pending HIFA demonstrations are available on the CMS Web site at [www.cms.hhs.gov/medicaid/hifa/default.htm](http://www.cms.hhs.gov/medicaid/hifa/default.htm). ■

#### Evaluation of the Ohio Behavioral Health Program

**Project No:** 500-95-0048/05  
**Project Officer:** Paul Boben  
**Period:** March, 1997 to March, 2004  
**Funding:** \$579,216  
**Principal Investigators:** Robert Schlenker and Janet Mitchell  
**Award:** Task Order  
**Awardee:** Research Triangle Institute  
 411 Waverly Oaks Road, Suite 330  
 Waltham, MA 02452-8414

**Description:** This evaluation was originally designed to assess the effect of Ohio's Specialty Managed Care for Behavioral Health Services Program on the delivery of behavioral health services. After the State elected not to implement the original behavioral health services program, the focus of the project was changed to a study of the entry and exit of capitated managed care plans in Ohio's Medicaid managed care program.

**Status:** In May 2002, CMS received a report from the contractor, entitled "Who Exits Managed Care Markets—Does Plan Quality Matter?" The report gives results from the contractor's analysis of Medicaid managed care plan entry and exit in Ohio. They found that plans with lower quality scores, as measured by the Ohio Consumer Assessment of Health Plans (CAHPS) Survey, were more likely to exit the Medicaid market than were the higher quality plans. In 2004, the contractor will expand upon this work by comparing Ohio Medicaid managed care to other plans (commercial, Medicaid plans in other States), using the National CAHPS Benchmarking Database. ■

#### Maine 1115 HIV/AIDS

**Project No:** 11-W-00128/01  
**Project Officers:** Linda Abbott and Jean Close  
**Period:** July, 2002 to June, 2007  
**Funding:** \$0  
**Principal Investigators:** Jude Walsh and Laureen Biczak  
**Award:** Waiver-Only Project  
**Awardee:** Maine Department of Human Services  
 Bureau of Medical Services  
 11 State House Station  
 Augusta, ME 04333-0011

**Description:** This is a section 1115 demonstration that provides a limited set of Medicaid benefits to individuals with HIV/AIDS who would not otherwise be eligible for Medicaid. The demonstration expands access to those without health insurance, allows individuals to become eligible for treatment through the demonstration without having to spend down, and allows individuals to be involved in gainful activity. This expansion population



includes individuals with HIV/AIDS with a gross family income up to 300 percent of the Federal poverty level (FPL). However, the State revised the eligibility criteria to include in the demonstration individuals who are HIV positive and whose family income is at or below 250 percent of the FPL. The demonstration provides more effective, early treatment of HIV disease by making available a limited but comprehensive package of services, including anti-retroviral therapies. The State believes that early treatment and case management services provided to individuals with HIV/AIDS reduces expensive hospitalizations and improves the quality of life for individuals who are able to enroll in the demonstration. Persons enrolled in the demonstration are responsible for payment of monthly premiums and service co-payments. If necessary, the State will limit the number of individuals who enroll in the demonstration, and will adopt a waiting list function. Individuals who, through the course of the demonstration, become eligible for non-demonstration Medicaid will be enrolled in the non-demonstration Medicaid program.

**Status:** Maine's 1115 HIV/AIDS demonstration program was approved on February 24, 2000. The demonstration was implemented on July 1, 2002. On August 16, 2002, Maine submitted an amendment to allow providers to refuse service delivery to uninsured persons in the demonstration who do not pay the co-payment. CMS approved the amendment request on January 17, 2003. Current enrollment is roughly 122. ■

### Minnesota Prepaid Medical Assistance Project Assistance Plus (PMAP+)

**Project No:** 11-W-00039/05  
**Project Officer:** Joseph Millstone  
**Period:** July, 1995 to June, 2005  
**Funding:** \$0  
**Principal Investigator:** Mary Kennedy  
**Award:** Waiver-Only Project  
**Awardee:** Minnesota Department of Human Services  
 Human Services Building  
 444 Lafayette Road  
 St. Paul, MN 55155-3849

**Description:** The Minnesota Prepaid Medical Assistance Project Plus (PMAP+) amended the original Minnesota Medicaid Demonstration by expanding the project in both size and scope. The PMAP demonstration enrolled all Aid to Families with Dependent Children eligibles, needy children, and pregnant women in eight Minnesota counties into prepaid managed care organizations. PMAP+ originally expanded prepaid managed care to nine additional counties and is expected to eventually be a statewide program. In addition, Medicaid eligibility was expanded on a statewide basis to include children

and pregnant women up to 275 percent of the Federal poverty level who were previously covered under the State's MinnesotaCare Program. Subsequent changes included expanding eligibility to include parents and caretaker relatives of children enrolled in the demonstration. The approval of Phase 2 in August 2000 allowed several changes that involved increasing flexibility for the State, particularly related to capitation payment. In July 2001, an amendment was approved to allow implementation of county-based purchasing by the South Country Health Alliance encompassing nine rural Minnesota counties, and in July 2003 an additional 10 counties were approved through the Prime West county-based purchasing project.

**Status:** Currently, there are approximately 340,000 enrollees in PMAP+ managed care organizations. In addition, the State's eligibility expansion has made approximately 90,000 MinnesotaCare children, caretaker adults, and pregnant women Medicaid eligible. Some parents and caretaker adults are now covered under the State Children's Health Insurance Program (SCHIP) and receive their care through the MinnesotaCare delivery system. Minnesota now operates Medicaid managed care in 82 of its 87 counties. On December 20, 2001, Minnesota was granted an extension of its demonstration from June 30, 2002 to June 30, 2005. ■

### Missouri Managed Care Plus (MC+)

**Project No:** 11-W-00122/07  
**Project Officer:** Maria Sotirelis  
**Period:** April, 1998 to March, 2007  
**Funding:** \$0  
**Principal Investigator:** Pamela Parker  
**Award:** Waiver-Only Project  
**Awardee:** Missouri Department of Social Services, Division of Medical Assistance  
 PO Box 1527  
 Jefferson City, MO 65102-1527

**Description:** The project extends Medicaid eligibility through a managed care delivery system to children, certain working parents transitioning off welfare, and certain noncustodial parents.

**Status:** The demonstration is not implemented for the following eligibility groups:

1. Noncustodial parents participating in Missouri's Parents' Fair Share program with incomes up to 100 percent of the Federal poverty level (FPL).
2. Noncustodial parents with incomes up to 125 percent of the FPL who are actively paying their legally obligated amount of child support for a maximum of 2 years.

The following eligibility groups are enrolled but with limitations:

1. Uninsured women who would otherwise lose Medicaid eligibility at the end of the 60-day postpartum period, regardless of income, for up to 2 years are now only eligible for family planning services for a period of up to 1 year.
2. Working parents who are transitioning off TANF and have a Medicaid-eligible child in the home were initially eligible with incomes up to 300 percent FPL for a maximum of 2 years. The group is only implemented up to 100 percent FPL.
3. A 6-month period of uninsurance is required before uninsured children through age 18 and up to 300 percent FPL can be enrolled. For children between 226–300 percent, other insurance must be unavailable and unaffordable. ■

### New Mexico Health Care Reform Demonstration

**Project No:** 11-W-00124/06  
**Project Officer:** Maurice Gagnon  
**Period:** January, 1999 to December, 2004  
**Funding:** \$20,000,000  
**Principal Investigator:** Ross Becker  
**Award:** Waiver-Only Project  
**Awardee:** New Mexico Department of Human Services  
 Medical Assistance Division  
 2025 South Pacheco, Ark Plaza  
 PO Box 2348  
 Santa Fe, NM 87504-2348

**Description:** This demonstration allows the State to implement its Title XXI (SCHIP) Medicaid expansion to cover children in families through age 18 with incomes between 186 percent and 235 percent of the Federal poverty level, including co-payment requirements for this population. The State anticipates that a Medicaid program with cost sharing for the SCHIP population will approach parity with privately covered families in the same income grouping. Co-payments will apply in both fee-for-service and managed care environments. The demonstration would operate concurrently with its existing 1915(b).

**Status:** New Mexico's demonstration has been approved and implemented by the State. ■

### New Jersey Managed Charity Care

**Project No:** 11-W-00120/02  
**Project Officer:** Daniel McCarthy  
**Period:** February, 1998 to February, 2003  
**Funding:** \$0  
**Principal Investigator:** Margaret Murray  
**Award:** Waiver-Only Project  
**Awardee:** New Jersey Department of Human Services  
 222 South Warren Street  
 PO Box 700  
 Trenton, NJ 08625-0700

**Description:** Under this demonstration, the State planned to use a portion of current disproportionate share hospital (DSH) funds to cover medical costs of indigent individuals provided outside of the hospital. Hospitals would be required to develop what the State calls "Hospital-Centered Managed Care Networks," which would deliver case-managed care to certain indigent individuals outside of the hospital, in physicians' offices and community clinics, in addition to the emergency and inpatient care currently provided. The objectives of the program are as follows:

1. Care coordination for those charity care patients with chronic conditions likely to benefit from a treatment plan
2. More efficient use of charity care funds, by using less costly and intensive care settings available through a provider network developed by hospitals
3. Enhanced knowledge of the charity care population through better data collection and information systems

**Status:** Due to legislative action in New Jersey, this proposed demonstration is "on hold." The State will be proposing a revised approach. ■

### The Partnership Plan

**Project No:** 11-W-00114/02  
**Project Officer:** Cheryl Tarver-Eaton  
**Period:** October, 1997 to March, 2006  
**Funding:** \$0  
**Principal Investigator:** Kathy Shure  
**Award:** Waiver-Only Project  
**Awardee:** New York Department of Health (Albany)  
 The Riverview Center, 4th Floor  
 150 Broadway  
 Albany, NY 12204-2719

**Description:** On July 15, 1997, the Partnership Plan demonstration was approved. The demonstration is designed to move approximately 2.1 million Medicaid

beneficiaries from a primarily fee-for-service delivery system to a mandatory managed care environment. The demonstration also expands health insurance coverage to the State's Safety Net (formerly Home Relief) recipients. As a result, 370,000 of the State's Safety Net recipients were converted to a Federal Title XIX eligibility group. Safety Net was a State-funded cash assistance program for low-income adults who were not otherwise eligible for Temporary Assistance for Needy Families (TANF) or Medicaid.

On June 29, 2001, the Family Health Plus (FHPlus) amendment to the demonstration was approved. This amendment expands health insurance coverage to additional low-income uninsured adults. The State began enrollment into FHPlus on October 1, 2001.

On September 27, 2002, a 3-year extension to the demonstration was approved effective from April 1, 2003, to March 31, 2006, along with two amendments. One amendment phases out the Community Health Care Conversion Demonstration Project during the extension period. The other amendment, effective October 1, 2002, expands family planning services to individuals with net incomes at or below 200 percent of the Federal poverty level.

**Status:** Implementation of the demonstration, excluding FHPlus, began on October 1, 1997, on a county-by-county basis. As of December 2003, 23 counties have implemented mandatory managed care for the TANF-related and Safety Net populations under the demonstration. These counties are Albany, Broome, Cattaraugus, Chautauqua, Columbia, Erie, Greene, Herkimer, Livingston, Monroe, Nassau, Niagara, Oneida, Onondaga, Ontario, Orleans, Oswego, Rensselaer, Rockland, Saratoga, Suffolk, Wayne, and Westchester. In addition, New York City has implemented mandatory enrollment for the TANF-related and Safety Net populations. Westchester is the only county that has implemented mandatory managed care for supplemental security income individuals. ■

### Oklahoma SoonerCare Demonstration

**Project No:** 11-W-00048/06  
**Project Officer:** Donna Schmidt  
**Period:** October, 1995 to December, 2003  
**Funding:** \$0  
**Principal Investigator:** Garth Splinter  
**Award:** Waiver-Only Project  
**Awardee:** Oklahoma Health Care Authority  
 4545 North Lincoln Boulevard  
 Oklahoma City, OK 73105

**Description:** SoonerCare fosters the creation of a managed care infrastructure in urban and rural areas, thus increasing access to primary care for

beneficiaries throughout the State and allowing for greater financial predictability of the State Medicaid program. SoonerCare uses fully capitated delivery systems in urban areas and requires urban plans to be "rural partners" by expanding their provider networks into adjacent rural areas. The urban health plan/rural partner program was implemented July 1, 1996, for Temporary Aid to Needy Families (TANF) and TANF-related beneficiaries. In rural areas without managed care organizations, a partially capitated primary care physician/case management (PCP/CM) model is used. The PCP/CM program was piloted in a tri-county area beginning April 1, 1996, and was implemented statewide on October 1, 1996. The program currently serves 319,365 beneficiaries. This includes TANF and TANF-related populations, as well as beneficiaries who are aged, blind, and disabled (ABD). The State implemented the program for the entire noninstitutionalized ABD population July 1, 1997.

**Status:** The project has been extended through 2003. ■

### Oregon 1115 Independent Choices

**Project No:** 11-W-00130/00  
**Project Officer:** Marguerite Schervish  
**Period:** December, 2001 to November, 2006  
**Funding:** \$0  
**Principal Investigator:** Genevieve Sundet  
**Award:** 1115 Demonstration  
**Awardee:** Oregon Senior and Disabled Services  
 500 Summer Street, NE  
 Salem, OR 97310-1015

**Description:** This is an 1115 demonstration that allows individuals who are eligible for long-term care services to self-direct providers for personal care and related services. The program is available in three regions of the State for up to 300 consumers. This demonstration is similar in concept to the approved "Cash and Counseling" demonstrations in New Jersey, Florida, and Arkansas. The main difference is that Oregon's demonstration does not employ a randomized or experimental design. In addition, compared to "Cash and Counseling," this demonstration requires all participants to manage their cash allowance. Monthly service allocations are paid directly into participants' Independent Choices checking accounts. Participants would be responsible for deducting appropriate taxes and calculating employer payroll taxes. Participants pay their providers directly from their service allotment. A payroll service is available for participants who would like assistance and is required to be used by participants who have not passed a competency test to perform their fiscal responsibilities. The demonstration is less than

statewide and operates in three service areas with up to 100 participants enrolled in each site (Clackamas County, Coos/Curry Counties, and Jackson/Josephine Counties). The State indicates in its proposal that the selection of these three sites allows the State to evaluate the replicability of the model statewide and to evaluate the program in both urban and rural settings.

**Status:** Oregon's 1115 Independent Choices demonstration program was approved on November 22, 2000. Oregon submitted an amendment to allow payment to a participant's family, including the spouse of the participant. CMS approved the amendment on May 7, 2001, and implemented the program on December 1, 2001. Current enrollment is about 200. ■

### Vermont Health Access Plan (VHAP)

**Project No:** 11-WV-00051/01  
**Project Officer:** Joan Peterson  
**Period:** January, 1996 to December, 2006  
**Funding:** \$0  
**Principal Investigator:** John Michael Hall  
**Award:** Waiver-Only Project  
**Awardee:** Vermont Agency of Human Services  
 103 South Main Street  
 Waterbury, VT 05671-1601

**Description:** Vermont's section 1115 Medicaid demonstration makes comprehensive health care coverage available to individuals, including those currently eligible for coverage under Vermont's Medicaid Program and uninsured poor who become newly eligible. VHAP implements a statewide mandatory Medicaid managed care program. The program began on January 1, 1996, and will operate for 11 years. The demonstration provides health care services to uninsured low-income Vermonters (up to 300 percent of the Federal poverty level [FPL] for children, and up to 185 percent of the FPL for parents and caretakers of eligible children). It also provides a Medicaid prescription-drug benefit to the State's low-income Medicare beneficiaries. Finally, it improves access, service coordination, and quality of care through the implementation of a managed care delivery system.

**Status:** As of October 2003, there were approximately 87,000 enrollees. ■

### Evaluation of Medicaid Family Planning Demonstrations

**Project No:** 500-00-0053/03  
**Project Officer:** Julie Jones  
**Period:** September, 2002 to November, 2003  
**Funding:** \$245,931  
**Principal Investigator:** Joanna Edwards  
**Award:** Task Order  
**Awardee:** C.N.A. Corporation  
 4401 Ford Avenue  
 PO Box 16268  
 Alexandria, VA 22302-8268

**Description:** The purpose of this project is to evaluate the impact and effectiveness of Medicaid section 1115 family planning demonstrations. While each State has a slightly different program, all of the demonstrations expand Medicaid eligibility for family planning services to women and, in some States, men also. Under Medicaid, State eligibility includes pregnant women and infants under 133 percent of poverty and may provide services, including family planning services, related to pregnancy and other conditions that may complicate pregnancy. States are also required to cover these services.

**Status:** The project is completed. ■

### Assertive Community Treatment (ACT) and Other Community-Based Services for Persons With Mental Illness or Persons With Co-Occurring Mental Illness and Substance Abuse Disorders

**Project No:** 500-00-0051/02  
**Project Officer:** Peggy Clark  
**Period:** September, 2002 to September, 2003  
**Funding:** \$132,352  
**Principal Investigator:** Karen Linkins  
**Award:** Task Order  
**Awardee:** Lewin Group  
 3130 Fairview Park Drive, Suite 800  
 Falls Church, VA 22042

**Description:** Assertive Community Treatment (ACT) is a community-based psychosocial service intervention designed to provide comprehensive, multidisciplinary treatment to individuals who have severe and persistent mental illness. This task order will provide research, technical assistance, and guidance to States. The goal is to improve the understanding of existing options under Medicaid using both waivers and State plan services to improve access to community-based services, such as ACT, to children with an emotional disturbance and adults with mental illness or co-occurring mental illness



and substance abuse or other disorders, as an alternative to a general hospital or nursing facility.

**Status:** This task order contract is a continuation and extension of previous work in FY 1999–FY 2001 under SAMHSA contract no. 282-98-0016, Task Order 19, which evaluated the implementation of evidence-based ACT programs in States and the use of Medicaid in financing such programs. The contract was modified in FY 2001 to gain a better understanding of current barriers and facilitators to using the Medicaid Rehabilitation Option and the Targeted Case Management Option, as well as test the utility and efficacy of the Budget Simulation Model developed during the earlier phase of the project. ■

### Evaluation of the BadgerCare Medicaid Demonstration

**Project No:** 500-00-0044/01  
**Project Officer:** Paul Boben  
**Period:** September, 2000 to December, 2003  
**Funding:** \$1,358,925  
**Principal Investigator:** Norma Gavin  
**Award:** Task Order  
**Awardee:** Research Triangle Institute (NC)  
 3040 Cornwallis Road  
 PO Box 12194  
 Research Triangle Park, NC  
 27709-2194

**Description:** The purpose of this project is to conduct an evaluation of BadgerCare, Wisconsin's section 1115 Medicaid demonstration and State Children's Health Insurance Program (SCHIP). The goals of BadgerCare are to increase access to health insurance for low-income families and to support families making the transition from welfare to work. The program uses State funds and Federal matching funds from the title XIX (Medicaid) and title XXI (SCHIP) Programs to extend public health insurance coverage to families with incomes up to 200 percent of the Federal poverty level. Section 1115 waivers were awarded to allow the State to use the title XIX and title XXI funds in this manner. The evaluation will determine whether BadgerCare has succeeded in meeting its Stated objectives and whether Wisconsin's experience with BadgerCare can help other States considering similar reforms.

**Status:** CMS received the final version of the Case Study Report in July 2002; a copy can be obtained from the CMS Web site at <http://www.cms.hhs.gov/researchers/reports/2002/badgercare.pdf>. A draft Final Report is anticipated to arrive in October 2003, and we expect this report to be ready for release in January 2004. ■

### Evaluation of the Diamond State Health Plan

**Project No:** 500-92-0033/04  
**Project Officer:** William Clark  
**Period:** September, 1994 to January, 2003  
**Funding:** \$498,035  
**Principal Investigator:** James Lubalin  
**Award:** Delivery Order  
**Awardee:** Research Triangle Institute (DC)  
 1615 M Street, NW, Suite 740  
 Washington, DC 20036-3209

**Description:** The original purpose of the contract was to evaluate the Delaware Health Care Partnership for Children, specifically the effectiveness of the demonstration in reaching its goal of improving access to and the quality of health care services delivered to Medicaid-eligible children in a cost-effective way. The State believed that by enrolling children into a managed care system operated by the Nemours Foundation, they would reap the benefits of a higher level of coordinated care, while the State and, in turn, the Federal Government would benefit from lower Medicaid costs. The contract was modified to focus more generally on the impacts of the Diamond State Health Plan on children, including children with special health care needs (the original evaluation had been limited to the Nemours Children's Clinics). The goal of the evaluation was broadened to assess whether this section 1115 demonstration's objective of increased access to high-quality, cost-effective care for Medicaid children is being met. In May 1996, RTI/HER also requested a 2-year no-cost extension (through September 29, 1999).

**Status:** The following topics have been analyzed:

1. The effect of managed care implementation in Delaware on the number and population of pediatric Medicaid beneficiaries receiving treatment for asthma
2. Children with special health care needs and the relationship of the education system and managed care. ■

### Evaluation of the State Medicaid Reform Demonstrations, II

**Project No:** 500-95-0040  
**Project Officer:** Paul Boben  
**Period:** September, 1995 to September, 2004  
**Funding:** \$5,959,408  
**Principal Investigator:** Terri Coughlin  
**Award:** Contract  
**Awardee:** Urban Institute  
 2100 M Street, NW  
 Washington, DC 20037

**Description:** This is an evaluation of Medicaid demonstrations in five States: California (Medicaid Demonstration for Los Angeles County), Kentucky (Kentucky Health Care Partnership Plan), Minnesota (PMAP+), New York (Partnership Plan), and Vermont (Vermont Health Access Plan). The project includes State-specific and cross-State analyses of demonstration impacts on use of services, insurance coverage, public and private expenditures, quality of care, access, and satisfaction. Data will come from site visit interviews with providers, advocacy groups, and State officials; participant surveys; State Medicaid Management Information Systems; and other sources. Additional analyses are planned that focus on the effect of managed care on the receipt of mental health services by Medicaid recipients. Funding for this additional work is from the Substance Abuse and Mental Health Services Administration of the Department of Health and Human Services.

**Status:** The contract was modified in August 2003 to provide for an expanded evaluation of the State of Vermont's pharmacy assistance programs (VHAP-Pharmacy and VScript). The following topical reports were received in FY 2003: (1) Poor and Disabled in Rural Kentucky: Access to Care for SSI Adults and Children; (2) The Minnesota Prepaid Medical Assistance Program Third Site Visit Report; (3) Estimating the Impacts of Medicaid Managed Care in Rural Minnesota; (4) Health Care Experiences of SSI Children Receiving Medicaid; (5) Medicaid Managed Care in Vermont: Site Visit Report, November 1999; (6) Evaluation of Vermont Pharmacy Assistance Programs for Low Income Medicare Beneficiaries; (7) Behavioral Health Services Under Medicaid Managed Care: Issues of Contracting, Delivery, and Coordination of Care (SAMHSA); and (8) The State of Care Coordination Under Medicaid Managed Care: Three States' Experiences Serving Children with Mental Illness (SAMHSA). Approximately one dozen additional topical reports, and a Final Report are expected from the contractor in FY 2004. ■

### Disproportionate Share Hospital (DSH) Funds Under Section 1115 Demos

**Project No:** 500-00-0044/04  
**Project Officer:** Alisa Adamo  
**Period:** September, 2003 to September, 2004  
**Funding:** \$225,000  
**Principal Investigator:** Susan Haber  
**Award:** Task Order  
**Awardee:** Research Triangle Institute (NC)  
 3040 Cornwallis Road  
 PO Box 12194  
 Research Triangle Park, NC  
 27709-2194

**Description:** The Medicaid DSH Program was designed to provide Federal funds to certain hospitals to help offset the cost of uncompensated care provided to the uninsured. Each State has a specified Federal DSH allotment. Several States have used section 1115 demonstration authority as a vehicle to expand Medicaid eligibility to previously uninsured individuals. Because these expansions would reduce the number of uninsured and thus the amount of uncompensated care provided by hospitals, some States have received section 1115 waivers to use DSH funds to help finance these eligibility expansions. This study will examine the impact of redirecting DSH funds for eligibility expansion and determine whether this is an effective strategy in reducing uncompensated care.

**Status:** The project is in the final stage. ■

### United Mine Workers of America Demonstration: An Integrated Care Coordination/Management Program for an Elderly, Chronically Ill Population

**Project No:** 95-C-99643/03  
**Project Officer:** Lee Phipps  
**Period:** January, 1990 to September, 2005  
**Funding:** \$0  
**Principal Investigator:** Joel Kavet  
**Award:** Contract  
**Awardee:** United Mine Workers of America  
 Health and Retirement Funds  
 2121 K Street, NW  
 Washington, DC 20037

**Description:** The United Mine Workers of America Health and Retirement Funds (UMWA /the Funds) has been a Health Care Prepayment Plan (HCPP) since 1978. It acts as a Medicare carrier; that is, carriers have instructions to forward all Part B claims they receive for UMWA beneficiaries to UMWA for processing. The Part A claims incurred by UMWA beneficiaries are paid by CMS's Fiscal Intermediary.

In 1990, CMS initially approved a demonstration to pay Part B services on a capitated basis rather than on a cost basis. In 1997, CMS approved waivers that continued the Part B capitation approach and included risk sharing for Part A services.

The basic risk-sharing methodology involves setting an experience-based Part A expenditure target prior to each payment year. After each payment year there is a reconciliation, whereby the actual Part A expenditures for UMWA beneficiaries are compared to the target. Any savings or losses are shared equally between CMS and UMWA within a 10-percent corridor around a target amount. Each year's target amount is determined from a rolling 3-year-old base trended forward using Medicare inflation rates.

UMWA has established Part B "managed care networks," covering 18 counties or about 30 percent of the beneficiaries, in selected areas of Alabama, Pennsylvania, and West Virginia. The provision of health care primarily remains on an FFS basis. UMWA's objective is to substitute less expensive care whenever appropriate. The UMWA continues to encourage primary and preventive care among its population in lieu of more expensive hospital care. Most of the interventions are designed to manage care provided in a fee-for-service setting, which include disease management, pre-certification of selected services, implementation of a pilot telephonic nurse advice line, coordination of care, networks of primary care providers that are designed to function in an open-access environment, and a state-of-the-art prescription drug management program that is currently provided by Advance PCS, a pharmacy benefits manager.

In 2001, CMS began paying a percentage of UMWA's prescription benefit drug cost. CMS will obtain information on the management of the benefit including using a pharmacy benefit manager, mandatory generic substitution, use of preferred pharmacy products, utilization review, and other techniques.

**Status:** As part of the fiscal year 2005 Presidential Budget, the UMWA demonstration is extended until September 2005 and CMS's contribution to the cost of the pharmacy drug benefit has increased. ■

## Minnesota Senior Health Options/Minnesota Disability Health Options

**Project No:** 11-WV-00024/05  
**Project Officer:** Susan Radke  
**Period:** April, 1995 to December, 2004  
**Funding:** \$0  
**Principal Investigator:** Pamela Parker  
**Award:** Waiver-Only Project  
**Awardee:** Minnesota Department of Human Services  
 Human Services Building  
 444 Lafayette Road  
 St. Paul, MN 55155-3849

**Description:** In April 1995, the State of Minnesota was awarded Medicare and Medicaid waivers for a 5-year demonstration designed to test delivery systems that integrate long-term care and acute-care services for elderly dual eligibles. Under this demonstration, the State is being treated as a health plan that contracts with CMS to provide services, and provides those services through subcontracts with three health care plans. CMS approved the State's request in year 2001 to extend MSHO and expand eligibility criteria to include persons under the age of 65 with disabilities. The expansion program titled, "Minnesota Disability Health Options Program"(MnDHO) includes both disabled dual eligible beneficiaries and Medicaid eligible only beneficiaries. Administration of this program is similar to MSHO. The MSHO extension and MnDHO expansion were approved through the period of October 1, 2001, through December 31, 2004. Medicare services for MSHO and MnDHO are provided using a demonstration waiver under § 402 of the Social Security Amendments of 1967. Medicaid services are provided under §1915(a) and §1915(c) of the Social Security Act. MSHO and MnDHO are managed care products that integrate Medicare and Medicaid financing; and provide acute- and long-term care service delivery, including home and community-based waiver services for dually eligible and Medicaid eligible physically disabled adults and elderly in a 10-county area in Minnesota, including the Twin Cities. MnDHO was implemented initially in Hennepin, Ramsey, Dakota, and Anoka counties and will expand to 3 more of the 10 MSHO counties. Enrollment in MSHO and MnDHO is voluntary and available to dually eligible beneficiaries living in institutions, community enrollees who meet institutional placement criteria, and other community enrollees whose needs do not meet institutional levels of care.

**Status:** The State of Minnesota has formally requested to extend the demonstration for an additional 3 years as well as expand the MnDHO eligibility to beneficiaries diagnosed with Mental Retardation and Developmental Disabilities (MR/DD). Further, the State has requested to expand MSHO into 10 rural counties. These three requests are currently being reviewed by CMS. ■

### Multistate Evaluation of Dual Eligibles Demonstrations

**Project No:** 500-96-0008/03  
**Project Officer:** Noemi Rudolph  
**Period:** September, 1997 to August, 2004  
**Funding:** \$3,311,708  
**Principal Investigator:** Robert Kane  
**Award:** Task Order  
**Awardee:** University of Minnesota  
 450 Gateway Building  
 200 Oak Street, SE  
 Minneapolis, MN 55455-2070

**Description:** This evaluation is designed to assess the impact of dual eligible demonstrations in the States of Minnesota and Wisconsin. Analyses will be conducted for each State and across States. The quasi-experimental design will utilize surveys, case studies, and Medicare and Medicaid data for analysis. Major issues to be examined include the use of a capitated payment strategy to expand services while reducing/controlling costs, the use of case management techniques and utilization management to coordinate care and improve outcomes, and the goal of responding to consumer preferences while encouraging the use of noninstitutional care. A universal theme to be developed is the difference between managing and integration.

**Status:** Surveys of beneficiaries and their families have been completed in Minnesota and Wisconsin. The surveys gathered information on several areas including satisfaction, the use of formal and informal care, and informal caregiver burden. Reports of survey and case study findings for both States and a report on the Minnesota utilization, cost, and quality of care have been submitted to CMS. ■

### Wisconsin Partnership Program

**Project No:** 11-WV-00123/05  
**Project Officer:** James Hawthorne  
**Period:** October, 1998 to December, 2006  
**Funding:** \$0  
**Principal Investigator:** Steve Landkamer  
**Award:** Waiver-Only Project  
**Awardee:** Wisconsin Department of Health and Family Services  
 1 South Pinckney Street, Suite 340  
 PO Box 340  
 Madison, WI 53701

**Description:** The Wisconsin Partnership Program (WPP) operates under Medicare 402/222 and Medicaid 1115 demonstration waivers approved on October 16, 1998. The demonstration became operational in early 1999 with the establishment of four sites: Elder Care and Community Living Alliance (CLA) in Madison, Community Care for the Elderly in Milwaukee, and Community Health Partnership (CHP) in Eau Claire. The demonstration targets nursing home certifiable beneficiaries who are eligible for both Medicare and Medicaid and facilitates the integration of acute and long-term care by paying participating plans for both Medicare and Medicaid services on a capitated basis. CLA and CHP are the first plans in the Nation to provide fully capitated Medicare and Medicaid services for people with physical disabilities. Roughly a quarter of Partnership enrollees are persons with disabilities, and about 85 percent of the total enrollment is dually eligible. The core of the WPP Partnership service delivery model is a multidisciplinary care team consisting of a primary care physician (PCP), nurse practitioner (NP), nurse, social worker, and coordinator. The team provides in-home services and facilitates continuity and coordination of care with the PCP and other health providers. Unlike the Program of All-inclusive Care for the Elderly, the WPP plans do not employ the primary care physicians and contract, instead, with independent physicians practicing in the local community. The remaining team members are employees of the plan and the NP, who serves as team leader, works closely with the primary care physician to ensure that he or she functions as an integral part of the treatment team.

**Status:** Renewal of the demonstration waivers was approved on 12/19/2003, extending the term of the demonstration to 12/31/2006. ■



### Multistate Dual Eligible Database and Analysis Development

**Project No:** 500-95-0047/03  
**Project Officer:** William Clark  
**Period:** September, 1997 to November, 2003  
**Funding:** \$2,135,418  
**Principal Investigator:** Don Lara  
**Award:** Task Order  
**Awardee:** Mathematica Policy Research (Princeton)  
 600 Alexander Park  
 PO Box 2393  
 Princeton, NJ 08543-2393

**Description:** This project will use available Medicare/Medicaid-linked statewide data in 10 to 12 States to develop a uniform database that can be used by States and the Federal Government to improve the efficiency and effectiveness of the acute- and long-term-care services to persons eligible for both Medicare and Medicaid (dual eligible). It will also conduct analyses derived from these data to strengthen the ability to develop risk-adjusted payment methods and deepen the understanding of Medicare-Medicaid program interactions as they relate to access, costs, and quality of service. Finally, it will recommend longer range options that will improve the usefulness of the database for operational and policy purposes.

**Status:** The project is constructing a multistate dual eligible database and using these data for analyses. Two years of the database have been constructed. However, the third year of Medicaid data has been unavailable for inclusion in the database due to problems external to this contract. Preliminary descriptive reports are being prepared with the 2 years of data, and research studies continue. ■

### Managing Medical Care for Nursing Home Residents (EverCare)

**Project No:** 95-C-90174  
**Project Officer:** Dennis Nugent  
**Period:** September, 1995 to December, 2004  
**Funding:** \$0  
**Principal Investigator:** John R. Mach, Jr., M.D.  
**Award:** Waiver-Only Project  
**Awardee:** Evercare  
 9900 Bren Road East  
 Minnetonka, MN 55343

**Description:** The Evercare Demonstration was developed to study the effectiveness of managing the acute care needs of Medicare beneficiaries who are long-

stay nursing home residents. The objective of the project was to determine if providing enhanced primary care to this population could prevent hospitalizations and reduce the total cost of care.

A physician/nurse practitioner team is assigned to each of the participating nursing homes to help manage and monitor the care of the program's enrollees. They work collaboratively with the facility's nursing staff to assist in problem solving and in coordinating the most appropriate and efficient care for the beneficiary. In addition, they are responsible for scheduling clinic and outpatient appointments and authorizing hospitalizations. The nurse practitioners also conduct an assessment and comprehensive evaluation of each Evercare member to measure health status and functional level. Evercare demonstration sites are located in Atlanta, Baltimore, Boston, Denver, Phoenix, and Tampa.

**Status:** As of January 2004, 18,054 Medicare beneficiaries were enrolled in the project. The average age of an Evercare member is 85 years old, and about 75 percent of their population membership is female. ■

### The Use of the PACE Health Survey for Dual Eligible Demonstration in Wisconsin, Minnesota, and Massachusetts

**Project No:** 500-00-0024/11  
**Project Officer:** Susan Radke  
**Period:** April, 2003 to April, 2005  
**Funding:** \$499,702  
**Principal Investigator:** Edith Walsh  
**Award:** Task Order  
**Awardee:** Research Triangle Institute (NC)  
 3040 Cornwallis Road  
 PO Box 12194  
 Research Triangle Park, NC  
 27709-2194

**Description:** The purpose of this project is to administer the PACE Health Survey for community-dwelling enrollees in three Dual Eligible Demonstrations, collect the survey data, and perform the appropriate impact analysis and analysis of survey data needed to implement an additional payment frailty adjuster. In June 2001, the Research Triangle Institute (RTI) was selected as a primary contractor to test and administer the PACE Health Survey (PHS) in a pilot study to a sample of PACE enrollees (500-00-0030 TO #3). The contract was amended in year 2002 to have RTI and its subcontractor, New England Research Institute (NERI), administer the PHS to all PACE organizations during years 2003 and 2004. In this project the existing contractor and subcontractor implemented the PHS in 2003 for all community dwelling members of the Wisconsin Partnership Program (WPP), the Minnesota Senior

Health Options (MSHO), and Minnesota Disability Health Options (MnDHO) demonstration. The survey will be repeated in 2004 for Wisconsin, Minnesota, and, in addition, will be conducted in the Massachusetts Senior Care Options (SCO) demonstration.

**Status:** The 2003 surveys were completed and the overall PHS survey response rate was high. Data files were delivered to CMS with the month that data collection was complete. A nonresponse analysis is currently being conducted to ascertain whether beneficiaries who did not respond to the PHS differ in frailty than those who did respond to the survey. Optional task 5 was exercised to begin sampling for the 2004 survey and analysis. However, the survey will not be conducted in Massachusetts SCO as this is a new demonstration that is now being implemented, and there are no current enrollees. ■

### DEMONSTRATION OF HHA SETTLEMENT FOR DUAL ELIGIBLES

CMS is conducting a pilot program with the States of Connecticut, Massachusetts, and New York that utilizes a sampling approach to determine the Medicare share of the cost of home health services claims for dual eligible beneficiaries that were originally submitted to and paid by the Medicaid agencies. This sampling will be used in lieu of individually gathering Medicare claims from home health agencies for every dual eligible Medicaid claim the State has possibly paid in error. This process will also eliminate the need for the home health agencies (HHA) to assemble, copy, and submit huge numbers of medical records, as well as the regional home health intermediary (RHHI) from reviewing every case.

The demonstration consists of two components: (1) an educational initiative to improve the ability of all parties to make appropriate coverage recommendations for crossover claims, and (2) a statistically valid sampling methodology to be applied in settlement of claims paid by Medicaid which the State believes may have a potential to also be covered by Medicare.

**Status:** Initial reviews have been conducted on the FY 2001 claims for Connecticut and Massachusetts, and payments have been made to these States. The demonstration RHHI, Associated Hospital Service, is currently reviewing the FY 2001 claims for New York. A reconsideration process has been finalized, and framework has been developed for the educational component. ■

### Demonstration of HHA Settlement for Dual Eligibles

**Project No:** 95-W-00084/02  
**Project Officer:** J. Donald Sherwood  
**Period:** January, 2002 to December, 2004  
**Funding:** \$0  
**Principal Investigator:** Jeff Flora  
**Award:** Waiver-Only Project  
**Awardee:** Office of Medicaid Management  
 New York Department of Health  
 Empire State Plaza  
 Corning Tower, Room 1466  
 Albany, NY 12237

### Demonstration of HHA Settlement for Dual Eligibles

**Project No:** 95-W-00085/01  
**Project Officer:** J. Donald Sherwood  
**Period:** January, 2000 to December, 2004  
**Funding:** \$0  
**Principal Investigator:** Julie Forgione  
**Award:** Waiver-Only Project  
**Awardee:** Division of Medical Assistance  
 Massachusetts Executive Office of  
 Health and Human Services  
 600 Washington Street, 5th Floor  
 Boston, MA 02111

### Demonstration of HHA Settlement for Dual Eligibles

**Project No:** 95-W-00086/01  
**Project Officer:** J. Donald Sherwood  
**Period:** January, 2001 to January, 2005  
**Funding:** \$0  
**Principal Investigator:** Kristine Ragaglia  
**Award:** Waiver-Only Project  
**Awardee:** Connecticut Department of Social  
 Services  
 25 Sigourney Street  
 Hartford, CT 06106

**Montana Welfare Reform: Families Achieving Independence in Montana (FAIM)**

**Project No:** 11-W-00040/08  
**Project Officer:** Joan Peterson  
**Period:** February, 1996 to January, 2004  
**Funding:** \$0  
**Principal Investigator:** Peter Blouke  
**Award:** Waiver-Only Project  
**Awardee:** Montana Department of Public Health and Human Services  
 PO Box 4210  
 Helena, MT 59604-4210

**Description:** The Montana Demonstration established statewide (1) a Job Supplement Program consisting of a set of Aid to Families with Dependent Children (AFDC)-related benefits to assist individuals at risk of becoming dependent upon welfare; (2) AFDC Pathways Program, in which all applicants had to enter into a family investment agreement requiring parents to secure child support; obtain early periodic screening, diagnosis, and treatment services, and immunizations for their children; and participate in the State's Jobs Opportunity and Basic Skills Program and limiting adults' benefits to a maximum of 24 months for single parents and 18 months for two-parent families; and (3) a community services program requiring 20 hours per week for individuals who reach the AFDC time limit but have not achieved self-sufficiency. Montana expanded AFDC-Unemployed Parent eligibility and increased the resource and automobile equity limits for AFDC and Food Stamp recipients. The State also increased the dependent care disregard, as well as disregards of energy assistance payments, earned income of dependent children in school, gifts of money for special occasions, and child support payments made to nonhousehold members for AFDC and Food Stamp purposes. Under its demonstration, enrollment of adult participants in a health maintenance organization (HMO) is mandated where geographically available. In areas where an HMO is not available, Montana offers basic Medicaid coverage through "Passport to Health," Montana's Primary-Care Case-Management Program.

**Status:** Montana elected to retain the waivers and expenditure authorities granted by CMS as part of the welfare reform demonstration following passage of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. ■

**Arizona Welfare Reform: Employing and Moving People Off Welfare and Encouraging Responsibility Program (EMPOWER)**

**Project No:** 11-W-00058/09  
**Project Officer:** Joan Peterson  
**Period:** May, 1995 to October, 2002  
**Funding:** \$0  
**Principal Investigator:** David Berns  
**Award:** Waiver-Only Project  
**Awardee:** Arizona Department of Economic Security  
 PO Box 6123  
 Phoenix, AZ 85005

**Description:** The Arizona statewide demonstration did not increase benefits for additional children conceived while the mother was receiving Aid to Families with Dependent Children (AFDC), but it limited benefits to adults to 24 months in any 60-month period and allowed recipients to deposit up to \$200 per month (with 50 percent disregarded) in Individual Development Accounts. It requires mothers who are minors to live with parents, extends transitional child care and Medicaid to 24 months, and eliminates the 100-hour rule for AFDC-Unemployed Parent cases.

**Status:** Arizona elected to retain the waivers and expenditure authorities granted by CMS as part of the welfare reform demonstration following passage of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. ■

**Massachusetts Welfare Reform, 1995**

**Project No:** 11-W-00065/01  
**Project Officer:** Sharon Donovan  
**Period:** November, 1995 to November, 2005  
**Funding:** \$0  
**Principal Investigator:** Gerald Whitburn  
**Award:** Waiver-Only Project  
**Awardee:** Executive Office of Health and Social Services  
 One Ashburton Place, Room 1109  
 Boston, MA 02108

**Description:** The major components of this demonstration were a 2-year time limit on Aid to Families with Dependent Children (AFDC) within every 60 months, with extensions in certain cases, and a work requirement for those on AFDC for more than 60 days. Certain recipients were exempt from the time limit and the work requirement (e.g., the disabled, pregnant women). Recipients who were not exempt were asked to sign an Employment Development Plan. The plan addressed such requirements as school attendance for

children and minor parents, immunizations for children, and employment-related requirements for adults. Additional incentives are being provided to encourage people to work. These include income disregards and transitional Medicaid. Medicaid waivers were required in order to provide 12 months' transitional Medicaid to families without regard to income.

**Status:** The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (August 22, 1996), permits States to continue many of the policies that had previously required waivers of pre-welfare reform Title IV-A by submitting a Temporary Assistance for Needy Families plan to the Administration for Children and Families. Unless otherwise indicated, States have elected to retain the waivers and expenditures authorities granted by CMS as part of the welfare reform demonstrations. ■

### A Better Chance Welfare Reform Project

**Project No:** 11-W-00056/03  
**Project Officer:** Alisa Adamo  
**Period:** October, 1995 to December, 2003  
**Funding:** \$0  
**Principal Investigator:** Elaine Archangelo  
**Award:** Waiver-Only Project  
**Awardee:** Delaware Health and Social Services (New Castle)  
 1901 North DuPont Highway  
 New Castle, DE 19720

**Description:** The Better Chance Welfare Reform Demonstration was designed to test a set of provisions that linked opportunity and responsibility, supported the formation and maintenance of two-parent families, provided positive incentives for private sector employment, and reduced teenage pregnancy. To reinforce these work and education requirements, the State is providing some additional benefits, such as an additional year of transitional Medicaid and transitional child care. Medicaid waivers were required to provide demonstration recipients 12 additional months of transitional Medicaid if their income is under 100 percent of the Federal poverty level.

**Status:** The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (August 22, 1996) allows States to continue many of the policies that had previously required waivers of pre-welfare reform Title IV-A by submitting a Temporary Assistance for Needy Families plan to the Administration for Children and Families. In some instances, States elected to retain waivers of pre-welfare reform title IV-A through the end of the demonstration period. Unless otherwise indicated, States have elected to retain the waivers and expenditures authorities granted by CMS as part of the welfare reform demonstrations. ■

### Tennessee “Families First” Demonstration

**Project No:** 11-W-00104/04  
**Project Officer:** Alisa Adamo  
**Period:** September, 1996 to September, 2006  
**Funding:** \$0  
**Principal Investigator:** Bob Corker  
**Award:** Waiver-Only Project  
**Awardee:** Tennessee Department of Human Services  
 400 Deaderick Street  
 Nashville, TN 37248

**Description:** “Families First” is a Welfare Demonstration. CMS approved waivers of the specific Medicaid regulations to provide 18 months of transitional Medicaid to people regardless of the reason for Aid to Families and Dependent Children (AFDC) case closure and/or whether the person was on AFDC for 3 out of the preceding 6 months.

**Status:** The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 permitted States to continue many of the policies that had previously required waivers of pre-welfare reform by submitting a Temporary Assistance for Needy Families plan to the Administration for Children and Families. Unless otherwise indicated, States have elected to retain the waivers and expenditures authorities granted by CMS as part of the welfare reform demonstrations. ■

### South Carolina Welfare Reform: Family Independence Act

**Project No:** 11-W-00081/04  
**Project Officer:** Joan Peterson  
**Period:** June, 1996 to May, 2003  
**Funding:** \$0  
**Principal Investigator:** Gwen Power  
**Award:** Waiver-Only Project  
**Awardee:** South Carolina Department of Health and Human Services  
 PO Box 8206  
 Columbia, SC 29202-8206

**Description:** This project limited Aid to Families with Dependent Children (AFDC) cash benefits to families with able-bodied adults to 24 months; allowed relocation, under certain criteria, for a family to receive a good-cause extension of AFDC cash benefits; required applicants and recipients to sign Individual Self-Sufficiency Plans (ISSPs) outlining employment, and training requirements and family skills training; allowed random testing in conjunction with substance abuse treatment; imposes progressive fiscal sanctions that may result in a full-family sanction for failure to



comply with the ISSP; required up-front job search as a condition of eligibility and required job-ready individuals to participate in alternate work experience; imposes a family cap, but provided benefits to affected children in the form of vouchers/commodities; eliminated principal earner provisions, work history requirements, and the 100-hour rule for AFDC-Unemployed Parent cases. The Family Independence Act also provided transitional child care and transitional Medicaid for up to 24 months and without regard to prior AFDC receipt. Medicaid eligibility is continued for individuals for up to 90 days after termination of AFDC benefits due to the removal of dependent child(ren) from the home because of abuse or neglect if the individual is participating in substance abuse treatment.

**Status:** South Carolina elected to retain the waivers and expenditures authorities granted by CMS as part of the welfare reform demonstration following passage of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. ■

### DEMONSTRATION TO IMPROVE DIRECT SERVICE COMMUNITY WORKFORCE GRANT INITIATIVE

The Demonstration To Improve the Direct Service Community Workforce Grant Initiative is part of the President's New Freedom Initiative to eliminate barriers to equality and grant a "New Freedom" to children and adults of all ages who have a disability or long-term illness so that they may live and prosper in their communities. CMS awarded five demonstration grants, which run from September 30, 2003, to September 29, 2006, to assist States and others to develop innovative programs and strategies that improve recruitment and retentions of direct service workers.

**Status:** This project is under way. ■

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#### Demonstration To Improve Direct Service Community Workforce

**Project No:** 95-P-92168/03-01  
**Project Officer:** Sue Knefley  
**Period:** September, 2003 to September, 2006  
**Funding:** \$680,500  
**Principal Investigator:** Mark Bernstein  
**Award:** Grant  
**Awardee:** University of Delaware  
 College of Human Services/EPP/  
 CDS, New Castle County  
 Newark, DE 19716

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#### Demonstration To Improve Direct Service Community Workforce

**Project No:** 11-P-92187/01-01  
**Project Officer:** Carey Appold  
**Period:** September, 2003 to September, 2006  
**Funding:** \$1,403,000  
**Principal Investigator:** Ellen Schneider  
**Award:** Grant  
**Awardee:** State of Maine/Governor's  
 Office of Health Policy & Finance  
 #1 State House Station  
 Augusta, ME 04333-0001

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#### Demonstration To Improve Direct Service Community Workforce

**Project No:** 11-P-92189/06-01  
**Project Officer:** Mary Pat Farkas  
**Period:** September, 2003 to September, 2006  
**Funding:** \$1,403  
**Principal Investigator:** Virginia Johnson  
**Award:** Grant  
**Awardee:** New Mexico Department of Health  
 Long-Term Services Division  
 1190 St. Francis Drive  
 Santa Fe, NM 87502-6110

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#### Demonstration To Improve Direct Service Community Workforce

**Project No:** 95-P-92214/04-01  
**Project Officer:** Sue Knefley  
**Period:** September, 2003 to September, 2006  
**Funding:** \$1,403  
**Principal Investigator:** Laura Gibbs  
**Award:** Grant  
**Awardee:** Pathways for the Future, Inc.  
 525 Mineral Springs Drive  
 Sylva, NC 28779

### Demonstration To Improve Direct Service Community Workforce

**Project No:** 95-P-92225/03-01  
**Project Officer:** Mary Pat Farkas  
**Period:** September, 2003 to September, 2006  
**Funding:** \$680,500  
**Principal Investigator:** Angela King  
**Award:** Grant  
**Awardee:** Volunteers of America, Inc.  
 National Office  
 1660 Duke Street  
 Alexandria, VA 22314

### Evaluation of Demonstration To Improve the Direct Service Community Workforce

**Project No:** 500-00-0051/03  
**Project Officer:** Kathryn King  
**Period:** September, 2003 to September, 2006  
**Funding:** \$394,403  
**Principal Investigator:** Karen Linkins  
**Award:** Task Order  
**Awardee:** Lewin Group  
 3130 Fairview Park Drive, Suite 800  
 Falls Church, VA 22042

**Description:** The purpose of this task order is to provide funding for a project that will provide a qualitative evaluation and design for a quantitative evaluation of the effectiveness of 7 to 10 demonstration projects designed to improve the recruitment and retention of direct service workers. These projects will be funded through the Demonstration To Improve the Direct Service Community Workforce. Information on this demonstration is available at [www.cms.hhs.gov/newfreedom/default.asp](http://www.cms.hhs.gov/newfreedom/default.asp).

**Status:** The Lewin Group provided CMS with a draft Web-based reporting tool that, when finalized, the grantees will use to submit electronic quarterly reports to CMS. In addition, Lewin finalized logic models and drafted site-specific evaluation plans for all grantees. ■

### AGING AND DISABILITY RESOURCE CENTER GRANTS

The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-

term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** This project is in its start-up phase. ■

### Aging and Disability Resource Center Grant

**Project No:** 11-C-91959/06-01  
**Project Officer:** Bob Nakielny  
**Period:** September, 2003 to September, 2006  
**Funding:** \$423,999  
**Principal Investigator:** Mary Tonore  
**Award:** Grant  
**Awardee:** Louisiana Governor's Office of Elderly Affairs  
 412 North 4th Street—3rd Floor  
 Baton Rouge, LA 70802

### Aging and Disability Resource Center Grant

**Project No:** 11-C-91953/01-01  
**Project Officer:** Jean Close  
**Period:** September, 2003 to September, 2006  
**Funding:** \$406,619  
**Principal Investigator:** Christine Gianopoulos  
**Award:** Grant  
**Awardee:** Maine Department of Human Services, Bureau of Elder and Adult Services  
 11 State House Station  
 Augusta, ME 04333

### Aging and Disability Resource Center Grant

**Project No:** 11-C-91942/03-01  
**Project Officer:** Barbara Collins  
**Period:** September, 2003 to September, 2006  
**Funding:** \$424,000  
**Principal Investigator:** Lisa Mullin  
**Award:** Grant  
**Awardee:** Maryland Department of Aging  
 301 West Preston Street  
 Suite 1007  
 Baltimore, MD 21201

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91939/01-01  
**Project Officer:** Bob Nakielny  
**Period:** September, 2003 to September, 2006  
**Funding:** \$397,500  
**Principal Investigator:** Ann Hartstein  
**Award:** Grant  
**Awardee:** Massachusetts Executive Office of Elder Affairs  
 One Ashburton Place, Room 517  
 Boston, MA 02108

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91934/01-01  
**Project Officer:** Barbara Collins  
**Period:** September, 2003 to September, 2006  
**Funding:** \$424,000  
**Principal Investigator:** Edgar J. Helms  
**Award:** Grant  
**Awardee:** University of New Hampshire  
 Office of Sponsored Research  
 Service Building, 51 College Road  
 Durham, NH 03824-3585

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91940/05-01  
**Project Officer:** Jean Close  
**Period:** September, 2003 to September, 2006  
**Funding:** \$391,742  
**Principal Investigator:** Krista Boston  
**Award:** Grant  
**Awardee:** Minnesota Board on Aging  
 444 Lafayette Road, North  
 St Paul, MN 55155-3843

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91945/02-01  
**Project Officer:** Bob Nakielny  
**Period:** September, 2003 to September, 2006  
**Funding:** \$422,962  
**Principal Investigator:** Nancy Day  
**Award:** Grant  
**Awardee:** New Jersey Department of Health and Senior Services, Division of Aging and Community Services  
 PO Box 807  
 Trenton, NJ 08625-0807

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91944/08-01  
**Project Officer:** Jean Close  
**Period:** September, 2003 to September, 2006  
**Funding:** \$370,621  
**Principal Investigator:** Charles Rehbein  
**Award:** Grant  
**Awardee:** Montana DPHHS-Senior LTC Division, State Office on Aging  
 PO Box 4210  
 Helena, MT 59604

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91949/03-01  
**Project Officer:** Barry Levin  
**Period:** September, 2003 to September, 2006  
**Funding:** \$404,920  
**Principal Investigator:** Gregory Howe  
**Award:** Grant  
**Awardee:** Commonwealth of Pennsylvania  
 Department of Aging  
 303 Forum Building  
 Harrisburg, PA 17101-1919

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91933/01-01  
**Project Officer:** Bob Nakielny  
**Period:** September, 2003 to September, 2006  
**Funding:** \$396,970  
**Principal Investigator:** Adelita Orefice  
**Award:** Grant  
**Awardee:** Rhode Island Department of Elderly Affairs  
 35 Howard Avenue  
 Benjamin Rush Building #55  
 Cranston, RI 02920

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91950/04-01  
**Project Officer:** Barbara Collins  
**Period:** September, 2003 to September, 2006  
**Funding:** \$424,000  
**Principal Investigator:** Sue Scally  
**Award:** Grant  
**Awardee:** South Carolina Department of Health and Human Services  
 Bureau of Senior Services  
 PO Box 8206  
 Columbia, SC 29202-8206

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91930/03-01  
**Project Officer:** Jean Close  
**Period:** September, 2003 to September, 2006  
**Funding:** \$423,457  
**Principal Investigator:** William E. Lytton, Jr.  
**Award:** Grant  
**Awardee:** West Virginia Bureau of Senior Services, Program Unit  
 1900 Kanawha Boulevard East  
 Building 10  
 Charleston, WV 25305

**An Evaluation of the Medicare Health Outcomes Survey Program**

**Project No:** 500-99-MD02  
**Project Officer:** Chris Haffer  
**Period:** May, 2003 to December, 2004  
**Funding:** \$450,000  
**Principal Investigators:** Julie Tyler and Marv Mandell  
**Award:** Contract  
**Awardee:** Delmarva Foundation for Medical Care  
 9240 Centreville Road  
 Easton, MD 21601-7098

**Description:** The Medicare Health Outcomes Survey (HOS) is one of the effectiveness of care measures of the Health Plan Employer Data and Information Set (HEDIS) for Medicare. The HEDIS is a set of defined measures to assess the health care quality provided by managed care plans. The Medicare HOS is a measure of a health plan's ability to maintain or improve the physical and emotional health of its Medicare beneficiaries over time. The HOS uses the SF-36 (a self-reported measure of functional status) to assess the physical and mental health status, at 2-year intervals, of Medicare beneficiaries in managed care. The goal of the HOS Program has been to gather valid and reliable health status data in Medicare managed care for use in quality improvement activities, public reporting, plan accountability, and improving health outcomes. The purpose of this contract is to conduct an evaluation of all aspects of the Medicare Health Outcomes Survey Program and to report on the extent to which the HOS is meeting its goals.

**Status:** The contractor will complete the evaluation of the Medicare HOS Program at the end of 2004. The results of the evaluation will include a report on the historical context of HOS and assessments of the HOS instrument and operational protocol (i.e., instrument power, precision, reliability and validity, survey attrition, alternative sampling strategies, survey administration methods) and the utility of HOS data for Medicare+Choice organizations, quality improvement organizations, CMS, and health services researchers. ■

**COMMUNITY-BASED TREATMENT ALTERNATIVES FOR CHILDREN GRANTS**

The Community-Based Treatment Alternatives for Children Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in developing a comprehensive, community-based mental health service delivery system through Medicaid, for children with serious emotional disturbances who would otherwise require care in a psychiatric residential treatment facility (PRTF). Currently, Medicaid provides inpatient psychiatric services for children under age 21 in hospitals, and extends these Medicaid benefits to



children in PRTFs. However, PRTFs do not meet the CMS definition of “hospital” so they do not qualify as institutions against which States may measure § 1915(c) waiver costs. Over the last decade, PRTFs have become the primary providers for children with serious emotional disturbances requiring an institutional level of care; however, States have been unable to use § 1915(c) waiver authority to provide Medicaid-funded home and community-based alternatives to care, which would keep the children in their homes and with their families. The funds available through this solicitation will assist States in assessing community-based alternatives to residential treatment.

**Status:** This project is in its start-up phase. ■

### Community-Based Treatment Alternatives for Children

**Project No:** 11-P-92104/01-01  
**Project Officer:** Peggy Clark  
**Period:** September, 2003 to September, 2006  
**Funding:** \$100,000  
**Principal Investigator:** Abigail Josephs  
**Award:** Grant  
**Awardee:** Commonwealth of Massachusetts  
 Division of Medical Assistance  
 One Ashburton Place, Room 1109  
 Boston, MA 02108

### Community-Based Treatment Alternatives for Children

**Project No:** 11-P-92030/05-01  
**Project Officer:** Pat Prete  
**Period:** September, 2003 to September, 2006  
**Funding:** \$100,000  
**Principal Investigator:** Amy Starin  
**Award:** Grant  
**Awardee:** Illinois Department of Human Services  
 4200 Oak Park Avenue  
 Chicago, IL 60607

### Community-Based Treatment Alternatives for Children

**Project No:** 11-P-92008/04-01  
**Project Officer:** Pat Prete  
**Period:** September, 2003 to September, 2006  
**Funding:** \$99,000  
**Principal Investigator:** Kenneth Sullivan  
**Award:** Grant  
**Awardee:** State of Mississippi—Office of the Governor, Division of Medicaid  
 239 North Lamar Street, Suite 801  
 Jackson, MS 39201-1399

### Community-Based Treatment Alternatives for Children

**Project No:** 18-P-92001/03-01  
**Project Officer:** Peggy Clark  
**Period:** September, 2003 to September, 2006  
**Funding:** \$100,000  
**Principal Investigator:** Thomas Merrick  
**Award:** Grant  
**Awardee:** Maryland Department of Health and Mental Hygiene  
 55 Wade Avenue  
 Catonsville, MD 21228

### Community-Based Treatment Alternatives for Children

**Project No:** 18-P-92043/07-01  
**Project Officer:** Deondra Moseley  
**Period:** September, 2003 to September, 2006  
**Funding:** \$99,821  
**Principal Investigator:** Linda Roebuck  
**Award:** Grant  
**Awardee:** Missouri Department of Mental Health  
 PO Box 687  
 Jefferson City, MI 65101

**Community-Based Treatment Alternatives for Children**

**Project No:** 18-P-92003/06-01  
**Project Officer:** Deondra Moseley  
**Period:** September, 2003 to September, 2006  
**Funding:** \$93,600  
**Principal Investigator:** Kimberly McPherson  
**Award:** Grant  
**Awardee:** Texas Health and Human Services Commission  
 PO Box 13247  
 Austin, TX 78711

**COMMUNITY-INTEGRATED PERSONAL ASSISTANCE SERVICES AND SUPPORTS GRANTS**

The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken a leadership role in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91567/06  
**Project Officer:** Cathy Cope  
**Period:** September, 2001 to September, 2004  
**Funding:** \$900,000  
**Principal Investigator:** Larry Ward  
**Award:** Grant  
**Awardee:** Arkansas Department of Human Services  
 329 Donaghey Plaza South  
 PO Box 1437  
 Little Rock, AR 72203

**Status:** This project is in its third year of funding. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91662/00  
**Project Officer:** Maria Reed  
**Period:** September, 2001 to September, 2004  
**Funding:** \$900,000  
**Principal Investigator:** Susan Cook  
**Award:** Grant  
**Awardee:** Alaska Department of Administration  
 3601 C Street, Suite 310  
 Anchorage, AK 99503

**Status:** This grant is in its third year of funding. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 11-P-92065/09  
**Project Officer:** Melissa Harris  
**Period:** September, 2003 to September, 2006  
**Funding:** \$600,000  
**Principal Investigator:** Ric Zaharia  
**Award:** Grant  
**Awardee:** Arizona Department of Economic Security, Division of Developmental Disabilities  
 1789 West Jefferson  
 Phoenix, AZ 85007

**Status:** This project is in its start-up phase. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91630/08-01  
**Project Officer:** Deondra Moseley  
**Period:** September, 2002 to September, 2005  
**Funding:** \$725,000  
**Principal Investigator:** William West  
**Award:** Grant  
**Awardee:** Colorado Department of Health Care Policy and Financing  
 1570 Sherman Street  
 Denver, CO 80203-1714

**Status:** This project is in its second year of funding. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 11-P-92005/01-01  
**Project Officer:** Marguerite Schervish  
**Period:** September, 2003 to September, 2006  
**Funding:** \$595,349  
**Principal Investigator:** David Parrella  
**Award:** Grant  
**Awardee:** Connecticut Department of Social Services  
 25 Sigourney Street  
 Hartford, CT 06106

**Status:** The project is in the start-up phase. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91647/00  
**Project Officer:** Mary Frances Laverdure  
**Period:** September, 2001 to September, 2004  
**Funding:** \$300,000  
**Principal Investigator:** Victor Borja  
**Award:** Grant  
**Awardee:** Guam Department of Integrated Services for Individuals with Disabilities  
 396 Chalan Kanton Ladera  
 Talofof, GU 96915

**Status:** The project is under way. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 11-P-91619/09-01  
**Project Officer:** Mary Frances Laverdure  
**Period:** September, 2002 to September, 2005  
**Funding:** \$725,000  
**Principal Investigator:** Bruce Anderson  
**Award:** Grant  
**Awardee:** State of Hawaii Department of Health  
 PO Box 3378  
 Honolulu, HI 96801

**Status:** This project is in its second year of funding. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91654/05-01  
**Project Officer:** Marguerite Schervish  
**Period:** September, 2002 to September, 2005  
**Funding:** \$725,000  
**Principal Investigator:** Kristen Schunk  
**Award:** Grant  
**Awardee:** Indiana Family and Social Services Administration  
 402 West Washington Street  
 Room W-451  
 PO Box 7083  
 Indianapolis, IN 46207-7083

**Status:** This project is on-going. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91563/07-01  
**Project Officer:** Marguerite Schervish  
**Period:** September, 2002 to September, 2005  
**Funding:** \$725,000  
**Principal Investigator:** Sara Sack  
**Award:** Grant  
**Awardee:** The University of Kansas Center for Research, Inc.  
 Younberg Hall, 2601 Gabriel  
 Parson, KS 67357

**Status:** The project is under way. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 11-P-92099/06-01  
**Project Officer:** Marguerite Schervish  
**Period:** September, 2003 to September, 2006  
**Funding:** \$464,184  
**Principal Investigator:** Anthony Speier  
**Award:** Grant  
**Awardee:** Louisiana Department of Health and Hospitals  
 Office of Mental Health  
 PO Box 4049  
 Baton Rouge, LA 70821-4049

**Status:** The project is in the start-up phase. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 11-P-92058/01-01  
**Project Officer:** Gregg Ukaegbu  
**Period:** September, 2003 to September, 2006  
**Funding:** \$579,178  
**Principal Investigator:** Margaret Chow-Menzer  
**Award:** Grant  
**Awardee:** Massachusetts Department of Mental Retardation  
 Division of Systems Integration  
 500 Harrison Avenue  
 Boston, MA 02118

**Status:** This project is in the start-up phase. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91634/05  
**Project Officer:** Cathy Cope  
**Period:** September, 2001 to September, 2004  
**Funding:** \$755,972  
**Principal Investigator:** Brenda Fink  
**Award:** Grant  
**Awardee:** Michigan Department of Community Health  
 320 South Walnut  
 PO Box 30479  
 Lansing, MI 48909

**Status:** This project is in its third year of funding. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91546/05  
**Project Officer:** Mark Reed  
**Period:** September, 2001 to September, 2004  
**Funding:** \$900,000  
**Principal Investigator:** Ann Roscoe  
**Award:** Grant  
**Awardee:** Minnesota Department of Human Services  
 Human Services Building  
 444 Lafayette Road  
 St. Paul, MN 55155-3849

**Status:** This grant is in its third year of funding. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91657/08  
**Project Officer:** Cathy Cope  
**Period:** September, 2001 to September, 2004  
**Funding:** \$850,000  
**Principal Investigator:** Karen Antonick  
**Award:** Grant  
**Awardee:** Montana Department of Public Health and Human Services  
 PO Box 4210  
 Helena, MT 59604-4210

**Status:** This project is in its third year of funding. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91668/04-01  
**Project Officer:** Mary Frances Laverdure  
**Period:** September, 2002 to September, 2005  
**Funding:** \$725,000  
**Principal Investigator:** Lynda McDaniel  
**Award:** Grant  
**Awardee:** North Carolina Department of Health and Human Services  
 Division of Mental Health DD/  
 Substance Abuse Services  
 2001 Mail Service Center  
 Raleigh, NC 27699-2001

**Status:** This project is in its second year of funding. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 11-P-92081/07-01  
**Project Officer:** Gregg Ukaegbu  
**Period:** September, 2003 to September, 2006  
**Funding:** \$600,000  
**Principal Investigator:** Mary Jo Iwan  
**Award:** Grant  
**Awardee:** Nebraska Department of Health and Human Services  
 301 Centennial Mall South, 5th Floor  
 PO Box 95044  
 Lincoln, NE 68509-5026

**Status:** This project is in the start-up phase. ■



**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91613/01  
**Project Officer:** Cathy Cope  
**Period:** September, 2001 to September, 2004  
**Funding:** \$900,000  
**Principal Investigator:** Colleen Ives  
**Award:** Grant  
**Awardee:** Granite State Independent Living  
 PO Box 7268  
 Concord, NH 03302-7268

**Status:** This project is in its third year of funding. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91570/09  
**Project Officer:** Mary Frances Laverdure  
**Period:** September, 2001 to September, 2004  
**Funding:** \$655,988  
**Principal Investigator:** Donny Loux  
**Award:** Grant  
**Awardee:** Nevada Department of Employment, Training and Rehabilitation  
 711 South Stewart Street  
 Carson City, NV 89701

**Status:** This grant is in its third year of funding. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91658/06  
**Project Officer:** Gregg Ukaegbu  
**Period:** September, 2001 to September, 2004  
**Funding:** \$850,000  
**Principal Investigator:** Carey Garland  
**Award:** Grant  
**Awardee:** Oklahoma Department of Human Services  
 312 NE 28th, Room 101  
 Oklahoma City, OK 73105

**Status:** The project is under way. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 11-P-92140/00-01  
**Project Officer:** Gregg Ukaegbu  
**Period:** September, 2003 to September, 2006  
**Funding:** \$585,007  
**Principal Investigator:** Laurie Powers  
**Award:** Grant  
**Awardee:** Oregon Health and Science University  
 3181 SW Sam Jackson Park Road  
 DB669  
 Portland, OR 97201-3098

**Status:** This project is in the start-up phase. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91519/01  
**Project Officer:** Gregg Ukaegbu  
**Period:** September, 2001 to September 2004  
**Funding:** \$539,730  
**Principal Investigator:** Deborah Florio  
**Award:** Grant  
**Awardee:** Rhode Island Department of Human Services, HCQFP, Center for Adult Health  
 600 New London Avenue  
 Cranston, RI 02920

**Status:** The project is under way. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91538/04-01  
**Project Officer:** Anita Yuskas  
**Period:** September, 2002 to September, 2005  
**Funding:** \$725,000  
**Principal Investigator:** Tami Wilson  
**Award:** Grant  
**Awardee:** Tennessee Department of Finance and Administration  
 Doctor's Building, 5th Floor  
 729 Church Street  
 Nashville, TN 37247-0064

**Status:** This project is in its second year of funding. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 11-P-92100/06-01  
**Project Officer:** Gregg Ukaegbu  
**Period:** September, 2003 to September, 2006  
**Funding:** \$599,763  
**Principal Investigator:** Cindy Kenneally  
**Award:** Grant  
**Awardee:** Texas Department of Human Services  
 PO Box 149030, Mailcode W521  
 Austin, TX 78714-9030

**Status:** Initial implementation activities in progress. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 11-P-92029/03-01  
**Project Officer:** Melissa Harris  
**Period:** September, 2003 to September, 2006  
**Funding:** \$513,557  
**Principal Investigator:** Tera Yoder  
**Award:** Grant  
**Awardee:** Virginia Commonwealth University  
 Partnership for People with Disabilities  
 PO Box 980568  
 Richmond, VA 23298-0568

**Status:** This project is in its start-up phase. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91622/03-01  
**Project Officer:** Anita Yuskauskas  
**Period:** September, 2002 to September, 2005  
**Funding:** \$725,000  
**Principal Investigator:** Sherry Shuman  
**Award:** Grant  
**Awardee:** West Virginia University Research Corporation on behalf of WVU/ WVUCED  
 955 Hartman Run Road  
 Morgantown, WV 26505-6845

**Status:** This project is in its second year of funding. ■

**Design of Evaluation Options of the Systems Change Grants**

**Project No:** 500-00-0044/03  
**Project Officer:** Susan Radke  
**Period:** September, 2002 to July, 2004  
**Funding:** \$299,976  
**Principal Investigator:** Edith Walsh  
**Award:** Task Order  
**Awardee:** Research Triangle Institute (NC)  
 3040 Cornwallis Road  
 PO Box 12194  
 Research Triangle Park, NC 27709-2194

**Description:** The purpose of this task order is to design research study options to evaluate the Systems Change Grants. There are four different types of grants: (1) Nursing Facility Transitions Grants, (2) Community-Integrated Personal Assistance Services and Supports Grants, (3) Real Choice Systems Change Grants, and (4) National Technical Assistance Exchange for Community Living Grants. Most States and Territories received funding from one or more of the four types of grants. The Americans with Disabilities Act (ADA), the Olmstead decision, and the Systems Change Grants apply to all Americans with a disability or long-term illness regardless of age or income. The Federal Government assists States and localities that are required to administer their services, programs, and activities “in the most integrated setting appropriate to the needs of qualified individuals with disabilities.” The scope of the ADA and the Olmstead decision are not limited to Medicaid or Medicare beneficiaries.

**Status:** In June 2001, the Research Triangle Institute (RTI) was selected as a primary contractor. RTI reviewed the System Change Grant summaries and developed a policy outcome typology for potential System Change Grant evaluations. CMS used this information to prioritize policy goals and identify potential research projects. CMS will change the Statement of Work (SOW) to have RTI identify only two to three potential projects from the goals that were prioritized, select one project and implement a study from one of the priority areas. A no-cost extension to the evaluation is anticipated. The evaluation will be designed to also be replicated at a later date. The output of this project shall be a written report describing designs of research studies that will analyze the impact of the Systems Change Grants on the provision of care in the community. ■

**FAMILY-TO-FAMILY HEALTH CARE INFORMATION AND EDUCATION CENTERS GRANTS**

The Family-to-Family Health Care Information and Education Centers Grants, part of the Real Choice

Systems Change Grants for Community Living, will support the development of Family-to-Family Health Care Information and Education Centers (Information and Education Centers). Organizations will use these awards to establish statewide family-run centers that will (1) provide education and training opportunities for families with children with special health care needs, (2) develop and disseminate needed health care and home and community-based services (HCBS) information to families and providers, (3) collaborate with other Family-to-Family Health Care Information and Education Centers to benefit children with special health care needs, and (4) promote the philosophy of individual and family-directed supports CMS is collaborating with the Health Resources and Services Administration (HRSA) in this initiative. In 2001, the HRSA, Maternal and Child Health Bureau, initiated a program to develop the capacities of families with children with special health care needs and assist States to meet their *Healthy People 2010* objectives for community-based services for children with special health care needs. The HRSA program is also entitled Family-to-Family Health Care Information and Education Centers. (For information on the *Healthy People 2010* initiative, please visit the Web site at <http://www.healthypeople.gov>.) CMS recognizes the wealth of knowledge that exists among parents who have years of experience with the long-term care system and the potential for this knowledge to be of assistance to other families and service providers. The goals of this initiative are to increase both access to and choice in HCBS for families who have children with special health care needs. Applicants must demonstrate that the project (1) establishes new capacity, (2) does not duplicate existing work or supplant existing funding, and (3) devotes all funding under the new proposal to endeavors that advance the goal and vision of the Information and Education Centers grant program.

**Status:** The project is in the start-up phase. ■

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#### Family-to-Family Health Care Information and Education Centers

**Project No:** 95-P-92139/00-01  
**Project Officer:** Kathy Rama  
**Period:** September, 2003 to September, 2006  
**Funding:** \$149,991  
**Principal Investigator:** Jayson Smart  
**Award:** Grant  
**Awardee:** Stone Soup Group  
 2401 East 42nd Avenue, Suite 202  
 Anchorage, AK 99508

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#### Family-to-Family Health Care Information and Education Centers

**Project No:** 95-P-92020/08-01  
**Project Officer:** Kathy Rama  
**Period:** September, 2003 to September, 2006  
**Funding:** \$150,000  
**Principal Investigator:** Christy Blakely  
**Award:** Grant  
**Awardee:** Cerebral Palsy of Colorado  
 Family Voices of Colorado  
 2200 South Jasmine Street  
 Denver, CO 80222

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#### Family-to-Family Health Care Information and Education Centers

**Project No:** 95-P-92093/05-01  
**Project Officer:** Kathy Rama  
**Period:** September, 2003 to September, 2006  
**Funding:** \$150,000  
**Principal Investigator:** Donna Gore Olsen  
**Award:** Grant  
**Awardee:** Parents, Let's Unite for Kids  
 4755 Kingway Drive, Suite 105  
 Indianapolis, IN 46205

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#### Family-to-Family Health Care Information and Education Centers

**Project No:** 95-P-92063/08-01  
**Project Officer:** Kathy Rama  
**Period:** September, 2003 to September, 2006  
**Funding:** \$150,000  
**Principal Investigator:** Dennis Moore  
**Award:** Grant  
**Awardee:** Parents, Let's Unite for Kids  
 4755 Kingway Drive, Suite 105  
 Indianapolis, IN 46205

**Family-to-Family Health Care Information and Education Centers**

**Project No:** 95-P-92038/03-01  
**Project Officer:** Kathy Rama  
**Period:** September, 2003 to September, 2006  
**Funding:** \$150,000  
**Principal Investigator:** Josie Thomas  
**Award:** Grant  
**Awardee:** The Parents Place of Maryland, Inc.  
 7484 Candlewood Road, Suite S  
 Hanover, MD 21076

**Family-to-Family Health Care Information and Education Centers**

**Project No:** 95-P-92042/02-01  
**Project Officer:** Kathy Rama  
**Period:** September, 2003 to September, 2006  
**Funding:** \$150,000  
**Principal Investigator:** Diana MTK Autin  
**Award:** Grant  
**Awardee:** Statewide Parent Advocacy Network of New Jersey, Inc. (SPAN)  
 35 Halsey Street  
 Newark, NJ 07120

**Family-to-Family Health Care Information and Education Centers**

**Project No:** 95-P-92112/07-01  
**Project Officer:** Kathy Rama  
**Period:** September, 2003 to September, 2006  
**Funding:** \$150,000  
**Principal Investigator:** Cheryl Dinnell  
**Award:** Grant  
**Awardee:** Family TIES of Nevada, Inc., Family Voices of Nevada  
 PO Box 50815  
 Sparks, NV 89435-0815

**Family-to-Family Health Care Information and Education Centers**

**Project No:** 95-P-92108/08-01  
**Project Officer:** Kathy Rama  
**Period:** September, 2003 to September, 2006  
**Funding:** \$150,000  
**Principal Investigator:** Lynn Boettcher Fjellanger  
**Award:** Grant  
**Awardee:** South Dakota Parent Connection, Inc.  
 3701 West 49th Street, Suite 200B  
 Sioux Falls, SD 57103

**Family-to-Family Health Care Information and Education Centers**

**Project No:** 95-P-92056/05-01  
**Project Officer:** Kathy Rama  
**Period:** September, 2003 to September, 2006  
**Funding:** \$142,972  
**Principal Investigator:** Elizabeth Hecht  
**Award:** Grant  
**Awardee:** Family Voices of Wisconsin  
 1500 Highland Avenue  
 Madison, WI 53705

**INDEPENDENCE PLUS INITIATIVE GRANTS**

The Independence Plus Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in meeting the Federal expectations established by CMS for the approval of self-directed program waivers and demonstration projects within the Independence Plus framework. These expectations include person-centered planning, individual budgeting, self-directed supports (including financial management services and supports brokerage), and quality assurance and improvement systems (including the participant protections of emergency back-up and viable incident management systems).

**Status:** This project is in its start-up phase. ■



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**Independence Plus Initiative**

**Project No:** 18-P-92019/08-01  
**Project Officer:** Anita Yuskas  
**Period:** September, 2003 to September, 2006  
**Funding:** \$391,137  
**Principal Investigator:** William West  
**Award:** Grant  
**Awardee:** Colorado DHCPF/Program Integrity Quality Improvement  
 1570 Grant Street  
 Denver, CO 80203

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**Independence Plus Initiative**

**Project No:** 18-P-92079/01-01  
**Project Officer:** Marguerite Schervish  
**Period:** September, 2003 to September, 2006  
**Funding:** \$175,000  
**Principal Investigator:** Laura Nuss  
**Award:** Grant  
**Awardee:** Connecticut Department of Mental Retardation  
 460 Capitol Avenue  
 Hartford, CT 06016

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**Independence Plus Initiative**

**Project No:** 18-P-92126/04-01  
**Project Officer:** Anita Yuskas  
**Period:** September, 2003 to September, 2006  
**Funding:** \$501,801  
**Principal Investigator:** Shelly Brantley  
**Award:** Grant  
**Awardee:** Florida Department of Children and Families  
 1317 Winewood Boulevard  
 Building 3  
 Tallahassee, FL 32399

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**Independence Plus Initiative**

**Project No:** 18-P-92088/04-01  
**Project Officer:** Deondra Moseley  
**Period:** September, 2003 to September, 2006  
**Funding:** \$432,108  
**Principal Investigator:** Darlene Meador  
**Award:** Grant  
**Awardee:** Georgia Department of Human Resources  
 Division of MHDDAD  
 2 Peachtree Street, NW 22.224  
 Atlanta, GA 30303

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**Independence Plus Initiative**

**Project No:** 18-P-92069/00-01  
**Project Officer:** Deondra Moseley  
**Period:** September, 2003 to September, 2006  
**Funding:** \$499,643  
**Principal Investigator:** David Rogers  
**Award:** Grant  
**Awardee:** Idaho Department of Health and Welfare, Division of Family and Community Services  
 450 West State Street  
 PO Box 83720  
 Pocatello, ID 83720-0036

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**Independence Plus Initiative**

**Project No:** 18-P-92071/06-01  
**Project Officer:** Marguerite Schervish  
**Period:** September, 2003 to September, 2006  
**Funding:** \$499,889  
**Principal Investigator:** Judy Moore  
**Award:** Grant  
**Awardee:** Louisiana Department of Health and Hospitals  
 446 North 12th Street  
 Baton Rouge, LA 70802

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**Independence Plus Initiative**

**Project No:** 18-P-92119/01-01  
**Project Officer:** Deondra Moseley  
**Period:** September, 2003 to September, 2006  
**Funding:** \$499,992  
**Principal Investigator:** Darlene O'Connor  
**Award:** Grant  
**Awardee:** University of Massachusetts Medical School  
 55 Lake Avenue North  
 Worchester, MA 01655

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**Independence Plus Initiative**

**Project No:** 18-P-92066/01-01  
**Project Officer:** Anita Yuskas  
**Period:** September, 2003 to September, 2006  
**Funding:** \$500,000  
**Principal Investigator:** Jane Gallivan  
**Award:** Grant  
**Awardee:** Department of Behavioral and Development Services of Maine  
 State House Station #40 Kennebec County  
 Augusta, ME 04333

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**Independence Plus Initiative**

**Project No:** 18-P-92062/07-01  
**Project Officer:** Anita Yuskas  
**Period:** September, 2003 to September, 2006  
**Funding:** \$427,461  
**Principal Investigator:** Kay Green  
**Award:** Grant  
**Awardee:** State of Missouri Department of Mental Health  
 1706 East Elm Street  
 Jefferson City, MO 65102

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**Independence Plus Initiative**

**Project No:** 18-P-92116/05-01  
**Project Officer:** Melissa Harris  
**Period:** September, 2003 to September, 2006  
**Funding:** \$478,600  
**Principal Investigator:** Michael Head  
**Award:** Grant  
**Awardee:** Michigan Department of Community Health  
 320 South Walnut  
 PO Box 30479  
 Lansing, MI 48909

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**Independence Plus Initiative**

**Project No:** 18-P-92047/08-01  
**Project Officer:** Anita Yuskas  
**Period:** September, 2003 to September, 2006  
**Funding:** \$499,963  
**Principal Investigator:** Denise C. King  
**Award:** Grant  
**Awardee:** Montana Department of Public Health and Human Services  
 Disability Service Division  
 PO Box 4210  
 Helena, MT 59604

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**Independence Plus Initiative**

**Project No:** 18-P-92054/05-01  
**Project Officer:** Deondra Moseley  
**Period:** September, 2003 to September, 2006  
**Funding:** \$500,000  
**Principal Investigator:** Dana Charlton  
**Award:** Grant  
**Awardee:** Ohio Department of Mental Retardation/Development Disability  
 35 East Chestnut Street, 5th Floor  
 Columbia, OH 43215-2541

## MONEY FOLLOWS THE PERSON REBALANCING INITIATIVE GRANTS

The Money Follows the Person Rebalancing Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to develop and implement strategies to reform the financing and service designs of State long-term support systems so that (1) a coherent package of State plan and home- and community-based services waiver services is available in a manner that permits funding to “follow the person” to the most appropriate and preferred setting, and (2) financing arrangements exist that enable transition services for individuals who transition between institution and community settings.

**Status:** This project is in its start-up phase. ■

### Money Follows the Person

**Project No:** 11-P-92077/09-01  
**Project Officer:** Mary Clarkson  
**Period:** September, 2003 to September, 2006  
**Funding:** \$750,000  
**Principal Investigator:** Carol Freels  
**Award:** Grant  
**Awardee:** California Department of Health Services, Office of Long-Term Care Suite 71.6031  
 PO Box 942732, MS 0018  
 Sacramento, CA 94234

### Money Follows the Person

**Project No:** 11-P-92045/00-01  
**Project Officer:** Mary Clarkson  
**Period:** September, 2003 to September, 2006  
**Funding:** \$749,999  
**Principal Investigator:** Beth Stamm  
**Award:** Grant  
**Awardee:** Idaho Department of Health and Welfare, Division of Family and Community Services  
 450 West State Street  
 PO Box 83720  
 Pocatello, ID 83720-0036

### Money Follows the Person

**Project No:** 11-P-92023/01-01  
**Project Officer:** Mary Clarkson  
**Period:** September, 2003 to September, 2006  
**Funding:** \$750,000  
**Principal Investigator:** David Goddu  
**Award:** Grant  
**Awardee:** Department of Behavioral and Development Services of Maine  
 State House Station #40  
 Kennebec County  
 Augusta, ME 04333

### Money Follows the Person

**Project No:** 11-P-92115/05-01  
**Project Officer:** Jean Close  
**Period:** September, 2003 to September, 2006  
**Funding:** \$746,650  
**Principal Investigator:** Michael Head  
**Award:** Grant  
**Awardee:** Michigan Department of Community Health  
 320 South Walnut  
 PO Box 30479  
 Lansing, MI 48909

### Money Follows the Person

**Project No:** 11-P-92044/09-01  
**Project Officer:** Linda Abbott  
**Period:** September, 2003 to September, 2006  
**Funding:** \$749,999  
**Principal Investigator:** Todd Butterworth  
**Award:** Grant  
**Awardee:** Nevada Department of Human Resources  
 3656 Research Way, Suite 32  
 Carson City, NV 89706

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**Money Follows the Person**

**Project No:** 11-P-92123/03-01  
**Project Officer:** Jean Close  
**Period:** September, 2003 to September, 2006  
**Funding:** \$698,211  
**Principal Investigator:** Gregory Howe  
**Award:** Grant  
**Awardee:** Commonwealth of Pennsylvania  
 Department of Public Welfare  
 PO Box 2675  
 Harrisburg, PA 17105

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**Money Follows the Person**

**Project No:** 11-P-92101/06  
**Project Officer:** Jean Close  
**Period:** September, 2003 to September, 2006  
**Funding:** \$730,422  
**Principal Investigator:** Cindy Kenneally  
**Award:** Grant  
**Awardee:** Texas Department of Human Services  
 PO Box 149030, Mailcode W521  
 Austin, TX 78714-9030

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**Money Follows the Person**

**Project No:** 11-P-92041/00-01  
**Project Officer:** Linda Abbott  
**Period:** September, 2003 to September, 2006  
**Funding:** \$608,008  
**Principal Investigator:** Nicole Williams  
**Award:** Grant  
**Awardee:** Washington Department of Social and Health Services  
 PO Box 45600  
 Olympia, WA 98503-5503

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**Money Follows the Person**

**Project No:** 11-P-92010/05-01  
**Project Officer:** Linda Abbott  
**Period:** September, 2003 to September, 2006  
**Funding:** \$743,813  
**Principal Investigator:** Thomas Swant  
**Award:** Grant  
**Awardee:** Wisconsin DHFS/Division of Disability and Elder Services  
 One West Wilson Street  
 PO Box 7850  
 Madison, WI 53707-7850

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**National Resource Center on Home and Community-Based Services—Quality Under Home and Community-Based Waiver**

**Project No:** 500-96-0006/02  
**Project Officers:** Thomas Shenk and Hunter McKay  
**Period:** September, 1999 to September, 2004  
**Funding:** \$3,463,070  
**Principal Investigator:** Brian Burwell  
**Award:** Task Order  
**Awardee:** Medstat Group (DC)  
 600 Maryland Avenue, SW  
 Suite 550  
 Washington, DC 20024-2512

**Description:** The purpose of this project is to develop and test the effectiveness of a National Consortium and Resource Center (NCRC) to improve access to consumer responsive home and community-based long-term care for people with disabilities of all ages. The long-range purpose of such a center would be to foster long-term care policies and practices that:

- Assist in "leveling the playing field" between institutional and community-based models of long-term care
- Provide consumers with more control over choosing the setting in which they receive long-term care
- Expand the range of high quality consumer responsive residential options, personal assistance, other home and community-based supports and health-related services available to people with significant mental and physical disabilities who wish to live in home and community-based settings
- Promote parity and equity between the availability of institutional and home and community-based long-term care



- Explore the potential for managed care organizations to utilize and expand consumer-directed home and community care
- Support financing and delivery approaches to consumer-responsive home and community-based services (HCBS) that enable States to manage and control their long-term care expenditures

During a 24-month development period, this project will focus on two related activities that could become the core of a fully operational NCRC. First, project staff will explore the effectiveness of a variety of national and State level strategies for supporting collaborative planning and problem solving among various stakeholders who influence the direction of long-term care policy reform (including Federal and State policy of officials, representatives of the aging and disability community, and providers). Second, they will try out several different approaches to equipping the various stakeholders with the information, tools, and technologies they need to plan and implement cost-effective systems of consumer-responsive home and community-based services.

**Status:** In addition to the basic activities, this project also has five significant sub-activities: (1) the creation of a national inventory of quality improvement, (2) the development of systems and procedures for the collection, analysis, and management of long-term care data, (3) performance measurement for the quality of care, (4) research on the availability and adequacy of personal assistance services, and (5) the collection, analysis and dissemination of promising practices. ■

#### National State-to-State Technical Assistance Program for Community Living

**Project No:** 11-P-92015/02-01  
**Project Officer:** Cathy Cope  
**Period:** September, 2003 to September, 2006  
**Funding:** \$4,399,959  
**Principal Investigator:** Donna J. Foster  
**Award:** Grant  
**Awardee:** Rutgers, The State University of New Jersey/Center for State Health Policy  
 3 Rutgers Plaza, Cook Campus  
 New Brunswick, NJ 08901

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use, and the manner by which services are provided
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities

Each particular project will help the State design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in the start-up phase. ■

#### National Technical Assistance Exchange for Community Living—ILRU

**Project No:** 11-P-91554/06  
**Project Officer:** Cathy Cope  
**Period:** September, 2001 to September, 2004  
**Funding:** \$4,322,121  
**Principal Investigator:** Richard Petty  
**Award:** Grant  
**Awardee:** Independent Living Research Utilization  
 2323 South Shepherd, Suite 1000  
 Houston, TX 77019

**Description:** This awardee, working jointly with Rutgers Center for State Health Policy, will develop, plan, and implement all technical assistance activities related to the Real Choice Systems Change projects. They will establish a single advisory group to provide feedback and input. They will ensure that people with disabilities and long-term illnesses are meaningfully involved in the activities undertaken as a result of grant funding. They will also facilitate involvement of State agencies, providers, and other public and private partners.

Together they will produce a Technical Assistance Integrated Management and Operations plan. They will assist States in addressing barriers to hiring staff.

**Status:** The project is under way. ■

### National Technical Assistance Exchange for Community Living—Rutgers

**Project No:** 11-P-91512/02  
**Project Officer:** Cathy Cope  
**Period:** September, 2001 to September, 2004  
**Funding:** \$4,322,121  
**Principal Investigator:** Susan Reinhard  
**Award:** Grant  
**Awardee:** Rutgers, The State University of New Jersey  
 Center for State Health Policy  
 317 George Street, Suite 400  
 New Brunswick, NJ 08901-2008

**Description:** This awardee, working jointly with Independent Living Research Utilization, will develop, plan, and implement all technical assistance activities related to the Real Choice Systems Change projects. They will establish a single advisory group to provide feedback and input. They will ensure that people with disabilities and long-term illnesses are meaningfully involved in the activities undertaken as a result of grant funding. They will also facilitate involvement of State agencies, providers, and other public and private partners. Together they will produce a Technical Assistance Integrated Management and Operations plan. They will assist States in addressing barriers to hiring staff.

**Status:** The project is under way. ■

### Providing Technical Assistance to Consumer Task Forces

**Project No:** 11-P-92073/07-01  
**Project Officer:** Cathy Cope  
**Period:** September, 2003 to September, 2006  
**Funding:** \$549,999  
**Principal Investigator:** Henry Claypool  
**Award:** Grant  
**Awardee:** Topeka Independent Living Resource Center  
 Consortium on Leadership Real Choice  
 501 SW Jackson, Suite 100  
 Topeka, KS 66603

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken a leadership role in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control. For additional information concerning these grants, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov).

**Status:** This project is in the start-up phase. ■

### REAL CHOICE SYSTEMS CHANGE “STARTER GRANTS”

This grant helps the State develop plans for improving their long-term support systems for community living include people with disabilities or long-term illness in the planning processes and prepare for other forthcoming grant opportunities. This project is one of the initial “Starter Grants” made available to all States and Territories to support programs that enable people with disabilities or long-term illness to reside in their own homes and participate fully in their communities. The award is one way CMS assists the State with “up-front” expenses such as organizing or supporting a consumer task force or a public-private partnership.

**Status:** This is a standard award to allow the recipient to begin the activities that will lead to later project[s]. ■

### Real Choice Systems Change “Starter Grant”

**Project No:** 10-P-91385/07  
**Project Officer:** Mary Guy  
**Period:** February, 2001 to September, 2003  
**Funding:** \$50,000  
**Principal Investigator:** Karl Hockenbarger  
**Award:** Grant  
**Awardee:** Kansas Department of Social and Rehabilitation Services  
 Docking State Office Building  
 915 SW Harrison Street  
 Topeka, KS 66612-1570

**Real Choice Systems Change “Starter Grant”**

**Project No:** 10-P-91401/09  
**Project Officer:** Mary Guy  
**Period:** February, 2001 to December, 2003  
**Funding:** \$50,000  
**Principal Investigator:** Adjit Bindra  
**Award:** Grant  
**Awardee:** California Department of Health Services  
 1501 Capitol Avenue  
 Suite 71.6086, MS 4000  
 PO Box 942732  
 Sacramento, CA 94234-7320

**REAL CHOICE SYSTEMS CHANGE GRANTS**

The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use, and the manner by which services are provided
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities

Each particular project will help the State design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Real Choice Systems Change—Alabama**

**Project No:** 18-P-91592/04  
**Project Officer:** Maria Reed  
**Period:** September, 2001 to September, 2004  
**Funding:** \$2,000,000  
**Principal Investigator:** Marilyn Ferguson  
**Award:** Grant  
**Awardee:** Alabama Medicaid Agency  
 1665 University Boulevard  
 PO Box 5624  
 Birmingham, AL 35294-0022

**Status:** This grant is in its third year of funding. ■

**Real Choice Systems Change—Arkansas**

**Project No:** 18-P-91598/06  
**Project Officer:** Cathy Cope  
**Period:** September, 2001 to September, 2004  
**Funding:** \$1,385,000  
**Principal Investigator:** Debbie Hopkins  
**Award:** Grant  
**Awardee:** Arkansas Department of Human Services  
 329 Donaghey Plaza South  
 PO Box 1437  
 Little Rock, AR 72203

**Status:** This project is in its third year of funding. ■

**Real Choice Systems Change—Delaware**

**Project No:** 18-P-91557/03  
**Project Officer:** Cathy Cope  
**Period:** September, 2001 to September, 2004  
**Funding:** \$1,200,000  
**Principal Investigator:** Joseph B. Keyes  
**Award:** Grant  
**Awardee:** Delaware Health and Social Services (Dover)  
 1901 North Dupont Highway  
 New Castle, DE 19720

**Status:** This grant is in its third year of funding. ■

**Real Choice Systems Change—Florida**

**Project No:** 18-P-91636/04  
**Project Officer:** Linda Abbott  
**Period:** September, 2001 to September, 2004  
**Funding:** \$2,000,000  
**Principal Investigator:** Lloyd Tribley  
**Award:** Grant  
**Awardee:** Florida Department of Management Services  
 4040 Esplanade Way, Suite 152  
 Tallahassee, FL 32399

**Status:** This grant is in its third year of funding. ■

**Real Choice Systems Change—Georgia**

**Project No:** 18-P-91579/04-01  
**Project Officer:** Melissa Harris  
**Period:** September, 2002 to September, 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Betty Knott  
**Award:** Grant  
**Awardee:** Georgia Department of Human Resources  
 Division of MHDDAD  
 2 Peachtree Street, NW 22.224  
 Atlanta, GA 30303

**Status:** This project is in its second year of funding. ■

**Real Choice Systems Change—Guam**

**Project No:** 18-P-91629/00  
**Project Officer:** Mary Frances Laverdure  
**Period:** September, 2001 to September, 2004  
**Funding:** \$673,106  
**Principal Investigator:** Peter John Camacho  
**Award:** Grant  
**Awardee:** Guam Department of Public Health and Social Services  
 PO Box 2816  
 Hagatna, GU 96932

**Status:** The project is under way. ■

**Real Choice Systems Change—Hawaii**

**Project No:** 18-P-91620/09  
**Project Officer:** Patricia Helphenstine  
**Period:** September, 2001 to September, 2004  
**Funding:** \$1,350,000  
**Principal Investigator:** Susan Chandler  
**Award:** Grant  
**Awardee:** Hawaii Department of Human Services  
 Queen Liliuokalani Building  
 1390 Miller Street  
 Honolulu, HI 96813

**Status:** This is in its third year of funding. ■

**Real Choice Systems Change—Idaho**

**Project No:** 18-P-91537/00  
**Project Officer:** Linda Abbott  
**Period:** September, 2001 to September, 2004  
**Funding:** \$1,102,148  
**Principal Investigator:** Beth Stamm  
**Award:** Grant  
**Awardee:** Idaho Department of Health and Welfare  
 450 West State Street, 5th Floor  
 Boise, ID 83720-0036

**Status:** This grant is in its third year of funding. ■

**Real Choice Systems Change—Illinois**

**Project No:** 18-P-91511/05  
**Project Officer:** Deondra Moseley  
**Period:** September, 2001 to September, 2004  
**Funding:** \$800,000  
**Principal Investigator:** Krista Saputo  
**Award:** Grant  
**Awardee:** Illinois Department of Human Services  
 425 South 4th Street  
 Springfield, IL 62701

**Status:** This grant is in its third year of funding. ■



**Real Choice Systems Change—Iowa**

**Project No:** 18-P-91596/07  
**Project Officer:** Jeannine Eberly  
**Period:** September, 2001 to September, 2004  
**Funding:** \$1,385,000  
**Principal Investigator:** Lila Starr  
**Award:** Grant  
**Awardee:** Iowa Department of Human Services  
 Hoover Building, 5th Floor, East 13th and Walnut Streets  
 Des Moines, IA 50319-0114

**Status:** This project is in its third year of funding. ■

**Real Choice Systems Change—Kentucky**

**Project No:** 18-P-91602/04  
**Project Officer:** Kathryn King  
**Period:** September, 2001 to September, 2004  
**Funding:** \$2,000,000  
**Principal Investigator:** Timothy Hawley  
**Award:** Grant  
**Awardee:** Kentucky Cabinet for Health Services  
 100 Fair Oaks Lane, 4E-B  
 Frankfort, KY 40621

**Status:** This grant is in its third year of funding. ■

**Real Choice Systems Change—Maine**

**Project No:** 18-P-91540/01  
**Project Officer:** Cathy Cope  
**Period:** September, 2001 to September, 2004  
**Funding:** \$2,300,000  
**Principal Investigator:** Christine Zukas-Lessard  
**Award:** Grant  
**Awardee:** Maine Department of Human Services  
 11 State House Station  
 Augusta, ME 04333

**Status:** This project is in its third year of funding. ■

**Real Choice Systems Change—Maryland**

**Project No:** 18-P-91593/03  
**Project Officer:** Cathy Cope  
**Period:** September, 2001 to September, 2004  
**Funding:** \$1,385,000  
**Principal Investigator:** Mark Leeds  
**Award:** Grant  
**Awardee:** Maryland  
 201 West Preston Street  
 Baltimore, MD 21201

**Status:** This project is in its third year of funding. ■

**Real Choice Systems Change—Massachusetts**

**Project No:** 18-P-91632/01  
**Project Officer:** Mark Reed  
**Period:** September, 2001 to September, 2004  
**Funding:** \$1,385,000  
**Principal Investigator:** Jay Himmelstein  
**Award:** Grant  
**Awardee:** University of Massachusetts Medical School  
 55 Lake Avenue North  
 Worcester, MA 01655

**Status:** The project is under way. ■

**Real Choice Systems Change—Michigan**

**Project No:** 18-P-91663/05  
**Project Officer:** Mark Reed  
**Period:** September, 2001 to September, 2004  
**Funding:** \$2,000,000  
**Principal Investigator:** Brenda Fink  
**Award:** Grant  
**Awardee:** Michigan, Department of Community Health  
 320 South Walnut  
 PO Box 30479  
 Lansing, MI 48909

**Status:** The project is under way. ■

**Real Choice Systems Change—Minnesota**

**Project No:** 18-P-91547/05  
**Project Officer:** Jeannine Eberly  
**Period:** September, 2001 to September, 2004  
**Funding:** \$2,300,000  
**Principal Investigator:** Karen Langenfeld  
**Award:** Grant  
**Awardee:** Minnesota Department of Human Services  
 Human Services Building  
 444 Lafayette Road  
 St. Paul, MN 55155-3849

**Status:** This project is in its third year of funding. ■

**Real Choice Systems Change—Missouri**

**Project No:** 18-P-91535/07  
**Project Officer:** Jeannine Eberly  
**Period:** September, 2001 to September, 2004  
**Funding:** \$2,000,000  
**Principal Investigator:** Sheri Taylor  
**Award:** Grant  
**Awardee:** Missouri Department of Social Services  
 615 Howerton Court  
 PO Box 6500  
 Jefferson City, MO 65102-6500

**Status:** This project is in its third year of funding. ■

**Real Choice Systems Change—Montana**

**Project No:** 18-P-91609/08  
**Project Officer:** Patricia Helphenstine  
**Period:** September, 2002 to September, 2005  
**Funding:** \$1,313,996  
**Principal Investigator:** John Zeeck  
**Award:** Grant  
**Awardee:** Montana Department of Public Health and Human Services  
 PO Box 4210  
 Helena, MT 59604-4210

**Status:** This project is in its second year of funding. ■

**Real Choice Systems Change—Nebraska**

**Project No:** 18-P-91568/07  
**Project Officer:** Melissa Harris  
**Period:** September, 2001 to September, 2004  
**Funding:** \$2,000,000  
**Principal Investigator:** Joni Thomas  
**Award:** Grant  
**Awardee:** Nebraska Department of Health and Human Services  
 301 Centennial Mall South  
 5th Floor  
 PO Box 95044  
 Lincoln, NE 68509-5026

**Status:** This project is in its third year of funding. ■

**Real Choice Systems Change—Nevada**

**Project No:** 18-P-91574/09-01  
**Project Officer:** Melissa Harris  
**Period:** September, 2002 to September, 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Judith Wright  
**Award:** Grant  
**Awardee:** Nevada Department of Human Resources  
 505 East King Street  
 Carson City, NV 89701

**Status:** This project is in its second year of funding. ■

**Real Choice Systems Change—New Hampshire**

**Project No:** 18-P-91516/01  
**Project Officer:** Mary Frances Laverdure  
**Period:** September, 2001 to September, 2004  
**Funding:** \$2,300,000  
**Principal Investigator:** Susan Fox  
**Award:** Grant  
**Awardee:** New Hampshire Department of Health and Human Services  
 105 Pleasant Street  
 Concord, NH 03301

**Status:** This grant is in its third year of funding. ■

**Real Choice Systems Change—New Jersey**

**Project No:** 18-P-91556/02  
**Project Officer:** Kathryn King  
**Period:** September, 2001 to September, 2004  
**Funding:** \$2,000,000  
**Principal Investigator:** William Ditto  
**Award:** Grant  
**Awardee:** New Jersey Department of Human Services  
 222 South Warren Street  
 PO Box 700  
 Trenton, NJ 08625-0700

**Status:** This grant is in its third year of funding. ■

**Real Choice Systems Change—New Mexico**

**Project No:** 18-P-91644/06  
**Project Officer:** Linda Abbott  
**Period:** September, 2002 to September, 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Debbie Armstrong  
**Award:** Grant  
**Awardee:** New Mexico Department of Human Services, Medical Assistance Division  
 228 East Palace Avenue  
 La Villa Revera Building, 1st Floor  
 Santa Fe, NM 87501

**Status:** This project is in its second year of funding. ■

**Real Choice Systems Change—New York**

**Project No:** 18-P-91664/02  
**Project Officer:** Mary Clarkson  
**Period:** September, 2002 to September, 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Betty Rice  
**Award:** Grant  
**Awardee:** New York Department of Health, DPPG, Office of Medicaid Management  
 1 Commerce Plaza, Room 724  
 Albany, NY 12237

**Status:** This project is in its second year of funding. ■

**Real Choice Systems Change—North Carolina**

**Project No:** 18-P-91661/04  
**Project Officer:** Mary Frances Laverdure  
**Period:** September, 2001 to September, 2004  
**Funding:** \$1,600,000  
**Principal Investigator:** Lynda McDaniel  
**Award:** Grant  
**Awardee:** North Carolina Department of Health and Human Services  
 2511 Mail Service Center  
 Raleigh, NC 27699-2515

**Status:** The project is under way. ■

**Real Choice Systems Change—Ohio**

**Project No:** 18-P-91611/05-01  
**Project Officer:** Sue Knefley  
**Period:** September, 2002 to September, 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Roland Hornbostel  
**Award:** Grant  
**Awardee:** Ohio Department of Job and Family Services  
 50 West Broad Street, 9th Floor  
 Columbus, OH 43215

**Status:** This project is in its second year of funding. ■

**Real Choice Systems Change—Oklahoma**

**Project No:** 18-P-91659/06-01  
**Project Officer:** Thomas Shenk  
**Period:** September, 2003 to September, 2005  
**Funding:** \$1,385,999  
**Principal Investigator:** Carey Garland  
**Award:** Grant  
**Awardee:** Oklahoma Department of Human Services  
 Aging Services Division  
 PO Box 25352  
 Oklahoma City, OK 73125

**Status:** This project is in its second year of funding. ■

**Real Choice Systems Change—Oregon**

**Project No:** 18-P-91670/00  
**Project Officer:** Kathryn King  
**Period:** September, 2001 to September, 2004  
**Funding:** \$2,000,996  
**Principal Investigator:** Karl Reer  
**Award:** Grant  
**Awardee:** Oregon Department of Human Services  
 2575 Bittern Street, NE  
 Salem, OR 97309-0740

**Status:** This grant is in its third year of funding. ■

**Real Choice Systems Change—Pennsylvania**

**Project No:** 18-P-91561/03  
**Project Officer:** Patricia Helphenstine  
**Period:** September, 2002 to September, 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Cheryl Martin  
**Award:** Grant  
**Awardee:** Pennsylvania Department of Public Welfare  
 PO Box 2675  
 Harrisburg, PA 17105-2675

**Status:** This project is in its second year of funding. ■

**Real Choice Systems Change—Rhode Island**

**Project No:** 18-P-91594/01-01  
**Project Officer:** Sue Knefley  
**Period:** September, 2002 to September, 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Frank Spinelli  
**Award:** Grant  
**Awardee:** Rhode Island Department of Human Services  
 Center for Adult Health  
 600 New London Avenue  
 Cranston, RI 02920

**Status:** This project is in its second year of funding. ■

**Real Choice Systems Change—South Carolina**

**Project No:** 18-P-91555/04  
**Project Officer:** Cathy Cope  
**Period:** September, 2001 to September, 2004  
**Funding:** \$2,300,000  
**Principal Investigator:** Sue Scally  
**Award:** Grant  
**Awardee:** South Carolina Department of Health and Human Services  
 PO Box 8206  
 Columbia, SC 29202-8206

**Status:** This grant is in its third year of funding. ■

**Real Choice Systems Change—Tennessee**

**Project No:** 18-P-91515/04  
**Project Officer:** Kathryn King  
**Period:** September, 2001 to September, 2004  
**Funding:** \$1,768,604  
**Principal Investigator:** Deborah Wolkhamer  
**Award:** Grant  
**Awardee:** Tennessee Department of Mental Health and Developmental Disabilities  
 Cordell Hull Building, 3rd Floor  
 425 5th Avenue, North  
 Nashville, TN 37243

**Status:** This grant is in its third year of funding. ■

**Real Choice Systems Change—Texas**

**Project No:** 18-P-91543/06-01  
**Project Officer:** Sue Knefley  
**Period:** September, 2002 to September, 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Christy Fair  
**Award:** Grant  
**Awardee:** Texas Health and Human Services Commission  
 PO Box 13247  
 Austin, TX 78711-3247

**Status:** This project is in its second year of funding. ■



**Real Choice Systems Change—Utah**

**Project No:** 18-P-91539/08-01  
**Project Officer:** Melissa Harris  
**Period:** September, 2002 to September, 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Sjan Talbot  
**Award:** Grant  
**Awardee:** Utah Department of Human Services  
 120 North 200 West, Suite 319  
 PO Box 45500  
 Salt Lake City, UT 84103

**Status:** This project is in its second year of funding. ■

**Real Choice Systems Change—Vermont**

**Project No:** 18-P-91565/01  
**Project Officer:** Cathy Cope  
**Period:** September, 2001 to September, 2004  
**Funding:** \$2,000,000  
**Principal Investigator:** Joan Haslett  
**Award:** Grant  
**Awardee:** Vermont Agency of Human Services  
 103 South Main Street  
 Waterbury, VT 05671-1601

**Status:** This project is in its third year of funding. ■

**Real Choice Systems Change—Virginia**

**Project No:** 18-P-91599/05  
**Project Officer:** Sue Knefley  
**Period:** September, 2001 to September, 2004  
**Funding:** \$1,385,000  
**Principal Investigator:** Diana Thorpe  
**Award:** Grant  
**Awardee:** Virginia Department of Medical Assistance Services  
 600 East Broad Street, Suite 1300  
 Richmond, VA 23219

**Status:** This grant is in its third year of funding. ■

**Real Choice Systems Change—Washington**

**Project No:** 18-P-91525/00-01  
**Project Officer:** Melissa Harris  
**Period:** September, 2002 to September, 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Cathy Cochran  
**Award:** Grant  
**Awardee:** Washington Department of Social and Health Services  
 PO Box 45600  
 Olympia, WA 98504

**Status:** This project is in its second year of funding. ■

**Real Choice Systems Change—West Virginia**

**Project No:** 18-P-91621/03  
**Project Officer:** Patricia Helphenstine  
**Period:** September, 2002 to September, 2005  
**Funding:** \$1,313,996  
**Principal Investigator:** Julie Shelton  
**Award:** Grant  
**Awardee:** West Virginia Department of Health and Human Resources Behavioral and Alternative Health Care  
 State Capitol Complex, Building 3 Room 251  
 Charleston, WV 25305

**Status:** This project is in its second year of funding. ■

**Real Choice Systems Change—Wisconsin**

**Project No:** 18-P-91587/05-01  
**Project Officer:** Melissa Harris  
**Period:** September, 2002 to September, 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Gail Propsom  
**Award:** Grant  
**Awardee:** Wisconsin Department of Health and Family Services/DDES  
 One West Wilson Street  
 PO Box 7851  
 Madison, WI 53707-7851

**Status:** This project is in its second year of funding. ■

## REAL CHOICE SYSTEMS CHANGE GRANTS FOR COMMUNITY LIVING—RESPITE FOR ADULTS GRANTS

The Respite for Adults Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to conduct studies assessing the feasibility of developing respite projects for caregivers of adults through Medicaid or other funding streams. States may examine the feasibility of providing respite for adults, as if it were a Medicaid service, to a limited target group (i.e., the elderly; individuals with mental illness, developmental disability, physical disability, etc.). Such projects will be expected to build in elements that are responsive to individual needs and offer the opportunity for consumer direction. For additional information concerning these grants, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov).

**Status:** This project is in the start-up phase. ■

### Real Choice Systems Change Grant for Community Living—Respite for Adults

**Project No:** 11-P-92097/09-01  
**Project Officer:** Kathryn King  
**Period:** September, 2003 to September, 2006  
**Funding:** \$100,000  
**Principal Investigator:** Jane Laciste  
**Award:** Grant  
**Awardee:** California Department of Mental Health System of Care—Adult Programs  
 1600 9th Street, Room 130  
 Sacramento, CA 95814

### Real Choice Systems Change Grant for Community Living—Respite for Adults

**Project No:** 11-P-92134/02-01  
**Project Officer:** Kathryn King  
**Period:** September, 2003 to September, 2006  
**Funding:** \$74,285  
**Principal Investigator:** Lisa Baum  
**Award:** Grant  
**Awardee:** New York State Department of Health  
 One Commerce Tower, Room 724  
 Albany, NY 12260

### Real Choice Systems Change Grant for Community Living—Respite for Adults

**Project No:** 11-P-92018/05-01  
**Project Officer:** Kathryn King  
**Period:** September, 2003 to September, 2006  
**Funding:** \$73,854  
**Principal Investigator:** Sharon Evanich  
**Award:** Grant  
**Awardee:** Ohio Department of Aging Administrative Division  
 50 West Broad Street, 9th Floor  
 Franklin County  
 Columbus, OH 43215

### Real Choice Systems Change Grant for Community Living—Respite for Adults

**Project No:** 11-P-92022/01-01  
**Project Officer:** Kathryn King  
**Period:** September, 2003 to September, 2006  
**Funding:** \$100,000  
**Principal Investigator:** Dianne Kayala  
**Award:** Grant  
**Awardee:** Rhode Island Department of Human Services, HCQFP, Center for Adult Health  
 600 New London Avenue  
 Cranston, RI 02920

## REAL CHOICE SYSTEMS CHANGE GRANTS FOR COMMUNITY LIVING—RESPITE FOR CHILDREN GRANTS

The Respite for Adults Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to conduct feasibility studies and explore development of Medicaid respite projects specifically targeted for caregivers of children. States may examine the feasibility of providing respite for children, as if it were a Medicaid service, to a limited target group (i.e., children with a physical disability, mental illness, developmental disability, etc.). Such projects will be expected to build in elements that are responsive to individual needs and offer the opportunity for consumer direction. For additional information concerning these grants, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov).

**Status:** This project is in the start-up phase. ■

**Real Choice Systems Change Grant for Community Living—Respite for Children**

**Project No:** 11-P-92004/04-01  
**Project Officer:** John Kapustka  
**Period:** September, 2003 to September, 2006  
**Funding:** \$100,000  
**Principal Investigator:** Dee Drake  
**Award:** Grant  
**Awardee:** Alabama Department of Mental Health and Mental Retardation  
 RSA Union Building  
 100 North Union Street  
 PO Box 30141  
 Montgomery, AL 36130

**Real Choice Systems Change Grant for Community Living—Respite for Children**

**Project No:** 11-P-92128/06-01  
**Project Officer:** John Kapustka  
**Period:** September, 2003 to September, 2006  
**Funding:** \$75,000  
**Principal Investigator:** Bruce Whitten  
**Award:** Grant  
**Awardee:** Arkansas Department of Human Services/Division of Developmental Disabilities Services/CMS  
 PO Box 1437-Slot S380  
 Little Rock, AR 72203

**Real Choice Systems Change Grant for Community Living—Respite for Children**

**Project No:** 18-P-92002/03-01  
**Project Officer:** Fred Harris  
**Period:** September, 2003 to September, 2006  
**Funding:** \$100,000  
**Principal Investigator:** Thomas Merrick  
**Award:** Grant  
**Awardee:** Maryland Department of Health and Mental Hygiene  
 Mental Hygiene Administration  
 55 Wade Avenue  
 SGHC Mitchell Building  
 Catonsville, MD 21228

**Real Choice Systems Change Grant for Community Living—Respite for Children**

**Project No:** 11-P-92033/05-01  
**Project Officer:** Fred Harris  
**Period:** September, 2003 to September, 2006  
**Funding:** \$99,399  
**Principal Investigator:** Sheri Falvay  
**Award:** Grant  
**Awardee:** Michigan Department of Community Health  
 Lewis Case Building, 5th Floor  
 Lansing, MI 48913

**Real Choice Systems Change Grant for Community Living—Respite for Children**

**Project No:** 18-P-92133/00-01  
**Project Officer:** Fred Harris  
**Period:** September, 2003 to September, 2006  
**Funding:** \$99,274  
**Principal Investigator:** Mike J. Maley  
**Award:** Grant  
**Awardee:** Oregon Department of Human Services for Seniors and People with Disabilities  
 500 Summer Street, NE, E-02  
 Salem, OR 97301-1073

**Real Choice Systems Change Grant for Community Living—Respite for Children**

**Project No:** 11-P-92014/01-01  
**Project Officer:** John Kapustka  
**Period:** September, 2003 to September, 2006  
**Funding:** \$100,000  
**Principal Investigator:** Deborah Florio  
**Award:** Grant  
**Awardee:** Rhode Island Department of Human Services, HCQFP  
 Center for Adult Health  
 600 New London Avenue  
 Cranston, RI 02920

## Research on System Change for Community Living

**Project No:** 500-00-0044/02  
**Project Officer:** Mary Frances Laverdure  
**Period:** September, 2001 to September, 2006  
**Funding:** \$1,899,996  
**Principal Investigator:** Richard Strowd  
**Award:** Task Order  
**Awardee:** Research Triangle Institute (DC)  
 1615 M Street, NW, Suite 740  
 Washington, DC 20036-3209

**Description:** The Centers for Medicare & Medicaid Services (CMS) has awarded a number of Systems Change Grants for Community Living. The goal of this related project is to conduct both formative and summative evaluation activities. The project will capture relevant data about:

- The target populations selected by the grantees for systemic change activities
- The specific long-term care needs of the populations to be addressed in systems change activities
- The similarities and differences between methods selected by grantees to address the needs identified in their State
- The challenges and barriers faced by grantees in addressing the long-term care needs of their selected populations
- The changes made in the provision of long-term care in the grantee States as a result of the activities of the grantees
- The factors influencing environments to create successful systems change

The project will also establish the initial framework and foundation for future summative evaluation activities, including:

- Outcome evaluations to measure whether the Systems Change Grants have caused demonstrable effects
- Impact evaluation to assesses the net effects both intended and unintended of the Systems Change Grants

- Value evaluation to examine the cost effectiveness of systems changes; the individual value to the consumer in the promotion of dignity, independence, individual responsibility, and choice; and self-direction, as well as the value to the community

Specifically, the project will:

- Collect, analyze, and evaluate data from the systems change activities of Systems Change Grantees regarding:
  - the extent of effectiveness and impact of consumer involvement in programmatic design, implementation, and evaluation
  - the types of direct services provided using grant funds, including the amount, duration, and scope of services provided
  - the types of changes made in State Medicaid programs to achieve enduring systems change
  - the changes in delivery of long-term services and supports and payment systems under State Medicaid programs and other funding streams
- Evaluate innovative systems and methods for delivery of community-based long-term care services and supports
- Perform research to assess the need for structural reforms of State Medicaid programs, and other Federal programs supporting long-term care
- Develop tools for measuring changes in access, availability, quality, and value of community-based long-term care
- Develop improved information resources to assist consumers and their representatives in choosing long-term care providers and supports
- Evaluate new payment and delivery models to improve access, availability, quality, and value of community-based long-term care

**Status:** This project is in year 2. ■

## NURSING FACILITY TRANSITIONS, INDEPENDENT LIVING PARTNERSHIP GRANTS

**Description:** The Nursing Facility Transitions, Independent Living Partnership Grants, part of the

Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community through grants to support independent living partnerships to selected independent living centers (ILCs). These grants will promote partnerships between ILCs and States to support nursing facility transitions.

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### Nursing Facility Transitions, Independent Living Partnership

**Project No:** 18-P-91656/04  
**Project Officer:** Maria Reed  
**Period:** September, 2001 to September, 2004  
**Funding:** \$450,000  
**Principal Investigator:** Daniel Kessler  
**Award:** Grant  
**Awardee:** Mid Alabama Chapter of the Alabama Coalition of Citizens with Disabilities  
 206 13th Street South  
 Birmingham, AL 35233-1317

**Status:** This grant is in its third year of funding. ■

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### Nursing Facility Transitions, Independent Living Partnership

**Project No:** 18-P-91582/09-01  
**Project Officer:** Thomas Shenk  
**Period:** September, 2002 to September, 2005  
**Funding:** \$337,500  
**Principal Investigator:** Sandy Hobart  
**Award:** Grant  
**Awardee:** Community Resources for Independence  
 980 Hopper Avenue  
 Santa Rosa, CA 95403

**Status:** This project is in its second year of funding. ■

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### Nursing Facility Transitions, Independent Living Partnership

**Project No:** 18-P-91528/03-01  
**Project Officer:** Thomas Shenk  
**Period:** September, 2002 to September, 2005  
**Funding:** \$270,000  
**Principal Investigator:** Larry Henderson  
**Award:** Grant  
**Awardee:** Independent Resources Inc  
 Two Fox Point Centre  
 6 Denny Road, Suite 205  
 Wilmington, DE 19809

**Status:** This project is in its second year of funding. ■

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### Nursing Facility Transitions, Independent Living Partnership

**Project No:** 18-P-91650/04  
**Project Officer:** Mary Guy  
**Period:** September, 2001 to September, 2004  
**Funding:** \$400,000  
**Principal Investigator:** Rebecca Ramage-Tuttle  
**Award:** Grant  
**Awardee:** DisABILITY LINK  
 755 Commerce Drive, Suite 415  
 Decatur, GA 30030

**Status:** This project is in its third year of funding. ■

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### Nursing Facility Transitions, Independent Living Partnership

**Project No:** 18-P-91513/05-01  
**Project Officer:** Mary Frances Laverdure  
**Period:** September, 2002 to September, 2005  
**Funding:** \$400,000  
**Principal Investigator:** David Hancox  
**Award:** Grant  
**Awardee:** Metropolitan Center for Independent Living  
 1600 University Avenue West  
 Suite 16  
 St Paul, MN 55104-3834

**Status:** This project is in its second year of funding. ■



**Nursing Facility Transitions, Independent Living Partnership**

**Project No:** 18-P-91637/02-01  
**Project Officer:** Mary Guy  
**Period:** September, 2002 to September, 2005  
**Funding:** \$400,000  
**Principal Investigator:** Pamela Reid  
**Award:** Grant  
**Awardee:** Resources for Independent Living Inc.  
 126 Franklin Street  
 Riverside, NJ 08075

**Status:** This project is in its second year of funding. ■

**Nursing Facility Transitions, Independent Living Partnership**

**Project No:** 18-P-91580/06  
**Project Officer:** Mary Guy  
**Period:** September, 2001 to September, 2004  
**Funding:** \$308,178  
**Principal Investigator:** Ronald Rocha  
**Award:** Grant  
**Awardee:** ARCIL, Inc.  
 825 East Rundberg Lane, Suite A-1  
 Austin, TX 78753

**Status:** This grant is in its third year of funding. ■

**Nursing Facility Transitions, Independent Living Partnership**

**Project No:** 18-P-91626/08-01  
**Project Officer:** Mary Guy  
**Period:** September, 2002 to September, 2005  
**Funding:** \$400,000  
**Principal Investigator:** Debra Mair  
**Award:** Grant  
**Awardee:** Utah Independent Living Center Inc.  
 3445 South Main Street  
 Salt Lake City, UT 84115

**Status:** This project is in its second year of funding. ■

**Nursing Facility Transitions, Independent Living Partnership**

**Project No:** 18-P-91551/05  
**Project Officer:** Mary Clarkson  
**Period:** September, 2001 to September, 2004  
**Funding:** \$450,000  
**Principal Investigator:** Kathie Knoble-Ivevson  
**Award:** Grant  
**Awardee:** Great Rivers Independent Living Services, Inc.  
 4328 Norman Coulee Road  
 Lacrosse, WI 54601

**Status:** The project is under way. ■

**NURSING FACILITY TRANSITIONS, STATE PROGRAM GRANTS**

The Nursing Facility Transitions, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91569/04-01  
**Project Officer:** Thomas Shenk  
**Period:** September, 2002 to September, 2005  
**Funding:** \$770,000  
**Principal Investigator:** Mellissa Mauser Galvin  
**Award:** Grant  
**Awardee:** Alabama Medicaid Agency  
 1665 University Boulevard  
 PO Box 5624  
 Birmingham, AL 35294-0022

**Status:** This project is in its second year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91585/00  
**Project Officer:** Mary Guy  
**Period:** September, 2001 to September, 2004  
**Funding:** \$800,000  
**Principal Investigator:** Christina Klein  
**Award:** Grant  
**Awardee:** Alaska Department of Administration  
 3601 C Street, Suite 310  
 Anchorage, AK 99503

**Status:** The project is under way. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91544/01  
**Project Officer:** Thomas Shenk  
**Period:** September, 2001 to September, 2004  
**Funding:** \$800,000  
**Principal Investigator:** Michele Parsons  
**Award:** Grant  
**Awardee:** Connecticut Department of Social Services  
 25 Sigourney Street  
 Hartford, CT 06106-5033

**Status:** This grant is in its third year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91583/06-01  
**Project Officer:** Thomas Shenk  
**Period:** September, 2002 to September, 2005  
**Funding:** \$598,444  
**Principal Investigator:** Kris Baldwin  
**Award:** Grant  
**Awardee:** Arkansas Department of Human Services  
 329 Donaghey Plaza South  
 PO Box 1437  
 Little Rock, AR 72203

**Status:** This project is in its second year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91534/03-01  
**Project Officer:** Thomas Shenk  
**Period:** September, 2002 to September, 2005  
**Funding:** \$566,772  
**Principal Investigator:** Victor Orija  
**Award:** Grant  
**Awardee:** Delaware Health and Social Services (Dover)  
 1901 North Dupont Highway  
 New Castle, DE 19720

**Status:** This project is in its second year of funding. ■

**Nursing Facility Transitions, State Program Grants**

**Project No:** 18-P-91651/08  
**Project Officer:** Thomas Shenk  
**Period:** September, 2001 to September, 2004  
**Funding:** \$800,000  
**Principal Investigator:** Kristie Braaten  
**Award:** Grant  
**Awardee:** Colorado Department of Health Care Policy and Financing  
 1570 Sherman Street  
 Denver, CO 80203-1714

**Status:** The project is under way. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91638/04  
**Project Officer:** Mary Guy  
**Period:** September, 2001 to September, 2004  
**Funding:** \$6,272,111  
**Principal Investigator:** Bonnie Hurd  
**Award:** Grant  
**Awardee:** Georgia Department of Community Health  
 2 Peachtree Street, NW  
 37th Floor  
 Atlanta, GA 30303

**Status:** This project is in its final year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91655/05  
**Project Officer:** Mary Guy  
**Period:** September, 2001 to September, 2004  
**Funding:** \$770,000  
**Principal Investigator:** Alison Becker  
**Award:** Grant  
**Awardee:** Indiana Family and Social Services Administration  
 402 West Washington Street  
 Room W-451  
 PO Box 7083  
 Indianapolis, IN 46207-7083

**Status:** This project is in its third year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91576/06-01  
**Project Officer:** Thomas Shenk  
**Period:** September, 2002 to September, 2005  
**Funding:** \$600,000  
**Principal Investigator:** Helene Robinson  
**Award:** Grant  
**Awardee:** Louisiana Department of Health and Hospitals  
 PO Box 2870, Bin 30  
 Baton Rouge, LA 70821-2870

**Status:** This project is in its second year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91524/03  
**Project Officer:** Mary Clarkson  
**Period:** September, 2001 to September, 2004  
**Funding:** \$800,000  
**Principal Investigator:** Rhoda Workman  
**Award:** Grant  
**Awardee:** Maryland Department of Human Resources  
 311 West Saratoga Street  
 Baltimore, MD 21201-3521

**Status:** This grant is in its third year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91591/01  
**Project Officer:** Kathryn King  
**Period:** September, 2001 to September, 2004  
**Funding:** \$770,000  
**Principal Investigator:** Margaret Chow-Menzer  
**Award:** Grant  
**Awardee:** Massachusetts Department of Mental Retardation  
 500 Harnson Avenue  
 Boston, MA 02118

**Status:** This grant is in its third year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91667/05  
**Project Officer:** Mary Guy  
**Period:** September, 2001 to September, 2004  
**Funding:** \$770,000  
**Principal Investigator:** David Verseput  
**Award:** Grant  
**Awardee:** Michigan Department of Community Health  
 Lewis Case Building, 5th Floor  
 Lansing, MI 48913

**Status:** This project is in its third year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91520/07-01  
**Project Officer:** Mary Clarkson  
**Period:** September, 2002 to September, 2005  
**Funding:** \$600,000  
**Principal Investigator:** Mary Jo Iwan  
**Award:** Grant  
**Awardee:** Nebraska Department of Health and Human Services  
 301 Centennial Mall South  
 5th Floor  
 PO Box 95044  
 Lincoln, NE 68509-5026

**Status:** This project is in its second year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91639/01  
**Project Officer:** Mary Frances Laverdure  
**Period:** September, 2001 to September, 2004  
**Funding:** \$770,000  
**Principal Investigator:** Todd Ringlestein  
**Award:** Grant  
**Awardee:** New Hampshire Department of Health and Human Services  
 105 Pleasant Street  
 Concord, NH 03301

**Status:** The project is under way. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91559/02-01  
**Project Officer:** Mary Guy  
**Period:** September, 2002 to September, 2005  
**Funding:** \$600,000  
**Principal Investigator:** Sharon Briggs  
**Award:** Grant  
**Awardee:** New Jersey Department of Health and Senior Services, Division of Consumer Support, OLTCO, Community Choice Initiative  
 PO Box 722  
 Trenton, NJ 08625-0722

**Status:** This project is in its second year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91649/04-01  
**Project Officer:** Mary Guy  
**Period:** September, 2002 to September, 2005  
**Funding:** \$600,000  
**Principal Investigator:** Lynne Perrin  
**Award:** Grant  
**Awardee:** North Carolina Department of Health and Human Services  
 2511 Mail Service Center  
 Raleigh, NC 27699-2515

**Status:** This project is in its second year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91642/01-01  
**Project Officer:** Thomas Shenk  
**Period:** September, 2002 to September, 2005  
**Funding:** \$600,000  
**Principal Investigator:** Dianne Kayala  
**Award:** Grant  
**Awardee:** Rhode Island Department of Human Services, HCQFP, Center for Adult Health  
 600 New London Avenue  
 Cranston, RI 02920

**Status:** This project is in its second year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91552/04-01  
**Project Officer:** Mary Clarkson  
**Period:** September, 2002 to September, 2005  
**Funding:** \$600,000  
**Principal Investigator:** Kara Lewis  
**Award:** Grant  
**Awardee:** South Carolina Department of Health and Human Services  
 PO Box 8206  
 Columbia, SC 29202-8206

**Status:** This project is in its second year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91518/00  
**Project Officer:** Thomas Shenk  
**Period:** September, 2001 to September, 2004  
**Funding:** \$770,000  
**Principal Investigator:** Kristina Smock  
**Award:** Grant  
**Awardee:** Washington Aging and Adult Services Administration  
 PO Box 45600  
 Olympia, WA 98504-5600

**Status:** This grant is in its third year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91623/03  
**Project Officer:** Thomas Shenk  
**Period:** September, 2001 to September, 2004  
**Funding:** \$551,678  
**Principal Investigator:** Julie Shelton  
**Award:** Grant  
**Awardee:** West Virginia Department of Health and Human Resources  
 Bureau for Medical Services  
 350 Capitol Street, Room 251  
 Charleston, WV 25301-3706

**Status:** This grant is in its third year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91672/05  
**Project Officer:** Mary Clarkson  
**Period:** September, 2001 to September, 2004  
**Funding:** \$800,000  
**Principal Investigator:** Gail Propsom  
**Award:** Grant  
**Awardee:** Department of Health and Family Services, Division of Supportive Living  
 One West Wilson  
 PO Box 7851  
 Madison, WI 53707-7851

**Status:** This grant is in its third year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91575/08-01  
**Project Officer:** Mary Guy  
**Period:** September, 2002 to September, 2005  
**Funding:** \$600,000  
**Principal Investigator:** Joan Franklin  
**Award:** Grant  
**Awardee:** Wyoming Department of Health  
 6101 North Yellowstone Road  
 Room 259B  
 Cheyenne, WY 82002

**Status:** This project is in its second year of funding. ■

**Nursing Home Transition 2000 Program Grant: Partnership for Community Living**

**Project No:** 11-P-91208/04  
**Project Officer:** Thomas Shenk  
**Period:** September, 2000 to September, 2003  
**Funding:** \$500,000  
**Principal Investigator:** David Rogers  
**Award:** Grant  
**Awardee:** Florida Agency for Health Care Administration  
 2727 Mahan Drive  
 Tallahassee, FL 32308

**Description:** This project targets Medicaid eligible individuals residing in nursing facilities, under the age of 55, who have sustained a traumatic brain injury and/or spinal cord injury. The goal is to transition individuals who choose to return to the community from nursing facilities by providing services and supporting unmet needs. Funding will help to expand current infrastructure for community-based supports and services, replicate the project with other disability groups, and sustain transitioned individuals in the community. Transition services include those not currently available, such as start-up costs to secure housing, food, home modifications, and housing workshops and education. The project is a cooperative agreement between Florida, State and local agencies, and private organizations.

**Status:** This effort has now been incorporated into the Real Choice System Change projects that focus on the disabled. ■

**Nursing Home Transition Grant—Arkansas Passages**

**Project No:** 11-P-91210/06  
**Project Officer:** Thomas Shenk  
**Period:** September, 2000 to September, 2002  
**Funding:** \$500,000  
**Principal Investigator:** Suzanne Crisp  
**Award:** Grant  
**Awardee:** Arkansas Department of Human Services  
 329 Donaghey Plaza South  
 PO Box 1437  
 Little Rock, AR 72203

**Description:** This project will assist a minimum of 80 persons to transition from nursing home to home care. The program will support staff, trained as independent services coordinators, from independent living centers and the area agencies on aging to identify persons who have the desire to return home. A comprehensive



assessment and detailed transition plan for returning to the home will be completed. Reimbursement to agencies for staff will be from grant funds. Transitional support services will provide payment for items, or services, to ensure the participant's environment is sufficient to promote a reasonable quality of life and independence. A selection of Medicaid State Plan services, waiver services, and community resources will be available to assist the transitioning of each participant and will serve as the major source of funding for most services.

**Status:** This effort has now been incorporated into the Real Choice System Change projects that focus on the disabled. ■

### Pennsylvania Nursing Home Transition Grant 2000

**Project No:** 11-P-91191/03  
**Project Officer:** Thomas Shenk  
**Period:** September, 2000 to September, 2003  
**Funding:** \$500,000  
**Principal Investigator:** Dale Laninga  
**Award:** Grant  
**Awardee:** Pennsylvania Department of Public Welfare  
 PO Box 2675  
 Harrisburg, PA 17105-2675

**Description:** This project links the U.S. Department of Health and Human Services to work collaboratively with the State of Pennsylvania to enhance choices available to Medicaid beneficiaries who are currently residing in nursing homes. The goal is to empower consumers, promote consumer choice, and assist people to transition from nursing homes into the community. This project builds on the existing efforts in Pennsylvania to remove the bias toward the use of nursing facilities in the existing long-term care system. While much work to date has had a pre-admission focus, this project complements current efforts by assisting persons currently in nursing homes to return to the community. Existing service programs and waivers will fund the services needed in the community and the project will pay for certain transitional needs that cannot be paid for with existing funding, such as deposits for housing and utilities or groceries. The State will evaluate the program to assist in the identification of barriers to returning to the community, either perceived or real, and will develop outcome measures so that the program can be evaluated for effectiveness and possibly replicated and/or continued beyond the terms of the Federal grant.

**Status:** This effort has now been incorporated into the Real Choice System Change projects that focus on the disabled. ■

### New Freedom Initiative Research

**Project No:** 500-00-0021/02  
**Project Officer:** Adrienne Delozier  
**Period:** September, 2003 to September, 2005  
**Funding:** \$1,099,768  
**Principal Investigator:** Brian Burwell  
**Award:** Task Order  
**Awardee:** Medstat Group (DC)  
 600 Maryland Avenue, SW  
 Suite 550  
 Washington, DC 20024-2512

**Description:** On June 22, 1999, the U.S. Supreme Court, in *Olmstead v. L.C.*, provided an important legal framework for State and Federal efforts to enable individuals with disabilities to live in the most integrated setting appropriate to their needs. This decision affirmed that no one should have to live in an institution or nursing home if they can live in the community with the right mix of supportive services for their long-term care. The Americans with Disabilities Act of 1990 (ADA) is both reinforced and clarified with the *Olmstead* decision. This decision has challenged the Federal Government and States to develop more opportunities for individuals with disabilities to live and participate in the community through more accessible systems of cost-effective community-based services. The Medicaid program plays a critical role in making long-term care available in the community by offering States many opportunities to deliver this care through mandatory State plan services like home health and optional services such as personal care. In addition, most States rely heavily on the Medicaid 1915(c), 1915(b), and 1115 waiver authorities to provide long-term care in the community.

On June 19, 2001, the President released an Executive Order aimed at expanding community-based alternatives for people with disabilities. He directed a number of Cabinet Secretaries, including Secretary of Health and Human Services (HHS) to "swift(ly) implement the *Olmstead* Decision (and) evaluate the policies, programs, statutes and regulations ... to determine whether any should be revised or modified to improve the availability of community-based service for qualified individuals with disabilities." Each agency head was required to report to the President, through the Secretary of HHS, the results of their evaluation. A preliminary report, entitled *Delivering on the Promise*, was sent to the President on December 21, 2001. Individual agency and department reports were sent on March 25, 2002. The HHS Report is entitled *Progress on the Promise*.

This contract supports several tasks that further the goals of the ADA, the *Olmstead* Decision, and the New Freedom Initiative including:

- Collection, Analysis, and Dissemination of Promising Practices, State Planning and Infrastructure—Supports the dissemination of timely information about effective models of and new innovations around long-term support on program and policy innovations so that all States and stakeholders may benefit from the experiences of their peers across the country.
- Ongoing Collection and Analysis of State Data for Long-Term Care Services—Supports the development of a Waiver Management System Database that will allow the Center for Medicaid and State Operations to (1) better manage its waiver programs and other long-term care services, and (2) ascertain progress States are making toward increasing the availability of community care opportunities for individuals with disabilities and the development of more accessible system of cost-effective community-based care.
- Implementing New Freedom Executive Order—Funds research to conduct an in-depth analysis of the issues identified in the Report to the President and provides a further assessment of the identified barriers to fulfilling the ADA/Olmstead decision and implementing reforms in long-term care.
- Family or Individual Directed Community Services Research—Supports the development of a core curricula for “Paradigm Shift: Moving from Medical to Empowerment Model.”

**Status:** The project is under way. ■

### ADA and Quality Initiatives

**Project No:** 500-00-0021/01  
**Project Officer:** Adrienne Delozier  
**Period:** September, 2003 to September, 2005  
**Funding:** \$2,114,494  
**Principal Investigator:** Brian Burwell  
**Award:** Task Order  
**Awardee:** Medstat Group (DC)  
 600 Maryland Avenue, SW  
 Suite 550  
 Washington, DC 20024-2512

**Description:** On June 22, 1999, the U.S. Supreme Court, in *Olmstead v. L.C.*, provided an important legal framework for State and Federal efforts to enable individuals with disabilities to live in the most integrated setting appropriate to their needs. This decision affirmed that no one should have to live in an institution or nursing home if they can live in the community with the right mix of supportive services for their long-term care. The Americans with Disabilities Act of 1990 (ADA) is both

reinforced and clarified with the Olmstead decision. This decision has challenged the Federal Government and States to develop more opportunities for individuals with disabilities to live and participate in the community through more accessible systems of cost-effective community-based services. The Medicaid program plays a critical role in making long-term care available in the community by offering States many opportunities to deliver this care through mandatory State plan services like home health and optional services such as personal care. In addition, most States rely heavily on the Medicaid 1915(c), 1915(b), and 1115 waiver authorities to provide long-term care in the community.

On June 19, 2001, the President released an Executive Order aimed at expanding community-based alternatives for people with disabilities. He directed a number of Cabinet Secretaries, including the Secretary of Health and Human Services (HHS), to “swift(ly) implement the Olmstead Decision (and) evaluate the policies, programs, statutes and regulations ... to determine whether any should be revised or modified to improve the availability of community-based service for qualified individuals with disabilities.” Each agency head was required to report to the President, through the Secretary of HHS, the results of their evaluation. A preliminary report, entitled *Delivering on the Promise*, was sent to the President on December 21, 2001. Individual agency and department reports were sent on March 25, 2002. The HHS Report is entitled *Progress on the Promise*.

This contract supports several tasks that further the goals of the ADA, the Olmstead Decision, and the New Freedom Initiative including:

- Ensuring Quality in the Medicaid Home and Community-Based Services (HCBS) Waiver Program—Provides a National Technical Assistance Contractor for the provision of technical assistance to States, the Centers for Medicare & Medicaid Services (CMS) Central Office, and CMS Regional Offices in the areas of quality management, including quality assurance and improvement.
- Resource Network for ADA/Olmstead—Supports the Web site HCBS.org that facilitates communication between States and consumers, provides seminal research and summaries on HCBS programs or initiatives, and provides important HCBS data.
- Olmstead-Informational Tools for States—Funds efforts by the National Conference of State Legislatures to help legislators understand their responsibilities and opportunities to provide cost-effective, high quality community-based services; develop systems that support employment of people with disabilities; and understand then comply with the *Olmstead v. L.C.* Supreme Court decision.

- Executive Order Administrative Costs—Will support the logistical planning and convening of two New Freedom Initiative Policy Summits.
- New Model Waivers—Will develop a training curriculum for CMS to present to States on self-direction in the context of Independence Plus waivers and demonstrations and implementing the required standards. Will also support technical assistance to States on implementation and CMS requirements related to Independence Plus.

**Status:** The project is under way. ■

### **Sustaining Culture Change in LTC Facilities for the Elderly**

**Project No:** 18-P-91857/03-01  
**Project Officer:** Mary Clarkson  
**Period:** September, 2003 to September, 2004  
**Funding:** \$99,350  
**Principal Investigator:** Arthur W. Rashap  
**Award:** Grant  
**Awardee:** Jefferson Area Board for Aging  
 674 Hillsdale Avenue, Suite 9  
 Charlottesville, VA 22901

**Description:** The Nursing Facility Transitions, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive. For additional information concerning these grants, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov).

**Status:** This project is in the start-up phase. ■

### **Cash and Counseling Demonstration: Florida**

**Project No:** 11-W-00117/04  
**Project Officer:** Tonya Moore  
**Period:** October, 1998 to February, 2008  
**Funding:** \$0  
**Principal Investigator:** Kerry Schoolfield  
**Award:** Waiver-Only Project  
**Awardee:** Florida Agency for Health Care Administration  
 2727 Mahan Drive  
 Tallahassee, FL 32308

**Description:** The purpose of these demonstrations is to provide greater autonomy to consumers of long-term care services by empowering them to purchase the assistance they require to perform activities of daily living. They are Section 1115 waiver projects awarded to the States of Arkansas, Florida, New Jersey, and New York. Persons chosen to participate in these demonstrations will be assigned to either a treatment or a control group. Beneficiaries selected for the treatment group will receive cash allowances, which they can use to select and purchase the personal assistance services (PAS) that meet their needs. Fiscal and counseling intermediary services will be available to those members of the treatment group who wish to utilize them. Individuals assigned to the control group will receive PAS services from traditional Medicaid providers, with the State making all vendor payments. Other partners in this collaborative effort include the Robert Wood Johnson Foundation, which funded the development of these projects; the Office of the Assistant Secretary for Planning and Evaluation within the Department of Health and Human Services, which is funding the evaluation; the National Program Office at the University of Maryland Center on Aging, which is performing various coordinating functions; and the National Council on Aging, which has served in an advisory capacity. An evaluation contract has been awarded to Mathematica Policy Research, Inc. It will assess differential outcomes with respect to cost, quality, and client satisfaction between traditional PAS services and alternative choice modalities.

**Status:** CMS approved the Florida operational protocol and conducted the initial portion of an operational readiness review. ■

**New Jersey Cash and Counseling Demonstration**

**Project No:** 11-W-00118/02  
**Project Officer:** Melissa Harris  
**Period:** May, 2000 to April, 2005  
**Funding:** \$0  
**Principal Investigator:** William Ditto  
**Award:** Waiver-Only Project  
**Awardee:** New Jersey Department of Human Services  
 222 South Warren Street  
 PO Box 700  
 Trenton, NJ 08625-0700

**Description:** The purpose of these demonstrations is to provide greater autonomy to consumers of long-term care services by empowering them to purchase the assistance they require to perform activities of daily living. They are Section 1115 waiver projects awarded to the States of Arkansas, Florida, and New Jersey. Persons chosen to participate in this demonstration will be assigned to either a treatment or a control group. Beneficiaries selected for the treatment group will receive cash allowances, which they can use to select and purchase the personal assistance services (PAS) that meet their needs. Fiscal and counseling intermediary services will be available to those members of the treatment group who wish to utilize them. Individuals assigned to the control group will receive PAS services from traditional Medicaid providers, with the State making all vendor payments. Other partners in this collaborative effort include the Robert Wood Johnson Foundation, which funded the development of these projects; the Office of the Assistant Secretary for Planning and Evaluation within the Department of Health and Human Services, which is funding the evaluation; the National Program Office at the University of Maryland's Center on Aging, which is performing various coordinating functions; and the National Council on Aging, which has served in an advisory capacity. An evaluation contract has been awarded to Mathematica Policy Research, Inc. It will assess differential outcomes with respect to cost, quality, and client satisfaction between traditional PAS services and alternative choice modalities.

**Status:** New Jersey received approval on October 8, 2003, to align their 5 years of demonstration status with their period of implementation. The revised dates of Section 1115 authority are May 1, 2000, through April 30, 2005. ■

**New York Cash and Counseling Demonstration: "Personal Preference Program"**

**Project No:** 11-W-00119/02  
**Project Officer:** Tonya Moore  
**Period:** October, 1998 to October, 2003  
**Funding:** \$0  
**Principal Investigator:** Karen Calley  
**Award:** Waiver-Only Project  
**Awardee:** New York Department of Health (Albany)  
 The Riverview Center, 4th Floor,  
 150 Broadway  
 Albany, NY 12204-2719

**Description:** The purpose of these demonstrations is to provide greater autonomy to consumers of long-term care services by empowering them to purchase the assistance they require to perform activities of daily living. Section 1115 waiver projects were awarded to the States of Arkansas, Florida, New Jersey, and New York. Beneficiaries selected for the treatment group will receive cash allowances, which they can use to select and purchase the personal assistance services (PAS) that meet their needs. Fiscal and counseling intermediary services will be available to those members of the treatment group who wish to utilize them. Individuals assigned to the control group will receive PAS services from traditional Medicaid providers, with the State making all vendor payments. The study will assess differential outcomes with respect to cost, quality, and client satisfaction between traditional PAS services and alternative choice modalities. This collaborative effort includes the Robert Wood Johnson Foundation, the Office of the Assistant Secretary for Planning and Evaluation, the National Program Office at the University of Maryland's Center on Aging, and the National Council on Aging.

**Status:** The Robert Wood Johnson Foundation and the Office of the Assistant Secretary for Planning and Evaluation, Department of Health and Human Services, have terminated their funding of this proposed New York project. ■

**MEDICAID AND SCHIP PAYMENT ACCURACY MEASUREMENT (PAM) PROJECT**

This is one of a series of projects designed to meet a Government Performance and Results Act goal of CMS. The purpose of the PAM project is to explore the feasibility of conducting payment accuracy studies in all States using a single methodology that can produce both State-specific and national level payment accuracy estimates for the title XIX Medicaid program.

**Status:** This project is in the start-up phase. ■



**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—Alabama**

**Project No:** 95-P-92265/04-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$134,720  
**Principal Investigator:** Arica White  
**Award:** Grant  
**Awardee:** Alabama Department of Public Health Children's Health Insurance Program  
 PO Box 303017, Suite 250  
 Montgomery, AL 36130-3017

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—Arizona**

**Project No:** 95-P-92274/09-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$647,154  
**Principal Investigator:** Sharon Miller  
**Award:** Grant  
**Awardee:** Arizona Health Care Cost Containment System  
 801 East Jefferson  
 Phoenix, AZ 85034

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—Arkansas**

**Project No:** 95-P-92273/06-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$195,442  
**Principal Investigator:** Teresa Hursey  
**Award:** Grant  
**Awardee:** Arkansas Department of Human Services  
 329 Donaghey Plaza South  
 PO Box 1437  
 Little Rock, AR 72203

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—Delaware**

**Project No:** 95-P-92264/03-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$188,577  
**Principal Investigator:** Mary Marinari  
**Award:** Grant  
**Awardee:** Delaware Health and Social Services  
 1901 North DuPont Highway  
 New Castle, DE 19720

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—Idaho**

**Project No:** 95-P-92268/00-01  
**Project Officer:** Wayne Slaughter  
**Period:** July, 2003 to September, 2004  
**Funding:** \$261,000  
**Principal Investigator:** DeeAnn Moore  
**Award:** Grant  
**Awardee:** Idaho Department of Health and Welfare  
 PO Box 83720  
 Boise, ID 83720-0036

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—Iowa**

**Project No:** 95-P-92258/07-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$300,000  
**Principal Investigator:** Patricia Ernst-Becker  
**Award:** Grant  
**Awardee:** Iowa Department of Human Services  
 Hoover Building, 5th Floor, East 13th and Walnut Streets  
 Des Moines, IA 50319-0114



**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—Louisiana**

**Project No:** 95-P-91684/06-03  
**Project Officer:** Wayne Slaughter  
**Period:** August, 2003 to August, 2004  
**Funding:** \$571,500  
**Principal Investigator:** Don Gregory  
**Award:** Grant  
**Awardee:** Louisiana Department of Health and Hospitals  
 PO Box 2870, Bin 30  
 Baton Rouge, LA 70821-2870

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—Massachusetts**

**Project No:** 95-P-92269/01-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$500,000  
**Principal Investigator:** Mary Fontaine  
**Award:** Grant  
**Awardee:** Massachusetts Division of Medical Assistance  
 600 Washington Street  
 Boston, MA 20111

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—New Mexico**

**Project No:** 95-P-92275/06-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to August, 2004  
**Funding:** \$222,400  
**Principal Investigator:** Leon Fogelfeld  
**Award:** Grant  
**Awardee:** New Mexico Department of Human Services  
 PO Box 2348  
 Santa Fe, NM 87504

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—North Carolina**

**Project No:** 95-P-91680/04-03  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$672,567  
**Principal Investigator:** Robert Nowell  
**Award:** Grant  
**Awardee:** North Carolina Department of Health and Human Services  
 2001 Mail Service Center  
 Raleigh, NC 27699-2515

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—North Dakota**

**Project No:** 95-P-91686/08-03  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$88,968  
**Principal Investigator:** Maggie Anderson  
**Award:** Grant  
**Awardee:** North Dakota Department of Human Services (Bismarck)  
 600 East Boulevard Avenue  
 Department 325  
 Bismarck, ND 58505-0250

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—Oklahoma**

**Project No:** 95-P-91808/06-02  
**Project Officer:** Christine Saxonis  
**Period:** September, 2003 to September, 2004  
**Funding:** \$331,433  
**Principal Investigator:** Kelly Shropshire  
**Award:** Grant  
**Awardee:** Oklahoma Health Care Authority  
 4545 North Lincoln Boulevard  
 Oklahoma City, OK 73105

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—South Dakota**

**Project No:** 95-P-92270/08-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$100,000  
**Principal Investigator:** Damian L. Prunty  
**Award:** Grant  
**Awardee:** South Dakota Department of Social Services, Office of Medical Services  
 700 Governor's Drive  
 Knelp Building  
 Pierre, SD 57501-2291

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—Texas**

**Project No:** 95-P-91683/06-03  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$399,722  
**Principal Investigator:** Aurora LeBrun  
**Award:** Grant  
**Awardee:** Texas Health and Human Services Commission  
 PO Box 13247  
 Austin, TX 78711-3247

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—Utah**

**Project No:** 95-P-92261/08-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$77,755  
**Principal Investigator:** Steven Gatzemeier  
**Award:** Grant  
**Awardee:** Utah Department of Health/HCF  
 Box 143103  
 Salt Lake City, UT 84114-3103

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—Washington**

**Project No:** 95-P-91681/00-03  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$361,161  
**Principal Investigator:** Charles P. Cummings  
**Award:** Grant  
**Awardee:** Washington Department of Social and Health Services  
 PO Box 45600  
 Olympia, WA 98503-5503

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—West Virginia**

**Project No:** 95-P-92266/03-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$104,090  
**Principal Investigator:** Terry A. Harless  
**Award:** Grant  
**Awardee:** West Virginia Children's Health Insurance Program  
 1900 Kanawha Boulevard, East  
 Building 3, Room 554  
 Charleston, WV 25305

**Medicaid and SCHIP Payment Accuracy Measurement (PAM) Project—Wyoming**

**Project No:** 95-P-91679/08-03  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$159,806  
**Principal Investigator:** Teri L. Green  
**Award:** Grant  
**Awardee:** Wyoming Department of Health  
 6101 North Yellowstone Road  
 Room 259B  
 Cheyenne, WY 82002

## MEDICAID PAYMENT ACCURACY MEASUREMENT (PAM) PROJECT

In FY 2000, CMS adopted a Government Performance and Results Act (GPRA) goal to develop and pilot test a methodology that can be used by all States to produce both State-specific and national level payment error estimates for Medicaid and SCHIP. In response to the requirements of this performance goal, the Center for Medicaid and State Operations (CMSO) initiated the Payment Accuracy Measurement (PAM) Project. PAM Project pilot tests of the methodology have been conducted in FY 2002, FY 2003, and FY 2004.

### Medicaid Payment Accuracy Measurement (PAM) Project—California

**Project No:** 95-P-92267/09-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$300,534  
**Principal Investigator:** Doug Smith  
**Award:** Grant  
**Awardee:** California Department of Health Services  
 591 North 7th Street, 1st Floor  
 PO Box 942732  
 Sacramento, CA 94237-7320

**Status:** This project is in the start-up phase. ■

### Medicaid Payment Accuracy Measurement (PAM) Project—Colorado

**Project No:** 95-P-92260/08-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$221,395  
**Principal Investigator:** Margaret Mohan  
**Award:** Grant  
**Awardee:** Colorado Department of Health Care Policy and Financing  
 1570 Sherman Street  
 Denver, CO 80203-1714

**Status:** This project is in the start-up phase. ■

### Medicaid Payment Accuracy Measurement (PAM) Project—District of Columbia

**Project No:** 95-P-92263/03-01  
**Project Officer:** Wayne Slaughter  
**Period:** August, 2003 to September, 2004  
**Funding:** \$295,328  
**Principal Investigator:** Bernardo Gonzales  
**Award:** Grant  
**Awardee:** District of Columbia Department of Health, Medical Assistance Administration  
 825 North Capital Street, NW  
 Washington, DC 20002

**Status:** This project is in the start-up phase. ■

### Medicaid Payment Accuracy Measurement (PAM) Project—Florida

**Project No:** 95-P-91806/04-02  
**Project Officer:** Wayne Slaughter  
**Period:** August, 2003 to September, 2003  
**Funding:** \$588,389  
**Principal Investigator:** Nancy Ross  
**Award:** Grant  
**Awardee:** Florida Agency for Health Care Administration  
 2727 Mahan Drive  
 Tallahassee, FL 32308

**Status:** The PAM Project grant recipient completed their grant requirements and submitted their final report to CMS as required. ■

### Medicaid Payment Accuracy Measurement (PAM) Project—Indiana

**Project No:** 95-P-91804/05-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2002 to September, 2003  
**Funding:** \$129,688  
**Principal Investigator:** Mathew DeLillo  
**Award:** Grant  
**Awardee:** Indiana Office of Medicaid Policy and Planning (OMPP)  
 402 West Washington Street  
 Room W382-MS07  
 Indianapolis, IN 46204

**Status:** The PAM Project grant recipient completed their grant requirements and submitted their final report to CMS as required. ■

**Medicaid Payment Accuracy Measurement (PAM) Project—Kentucky**

**Project No:** 95-P-92259/04-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$173,700  
**Principal Investigator:** Jerri Heltzel Robinson  
**Award:** Grant  
**Awardee:** Kentucky Department for Medicaid Services  
 275 East Main Street, 6 E B  
 Frankfort, KY 40601

**Status:** This project is in the start-up phase. ■

**Medicaid Payment Accuracy Measurement (PAM) Project—Louisiana**

**Project No:** 95-P-91684/06-02  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2002 to September, 2003  
**Funding:** \$190,500  
**Principal Investigator:** Don Gregory  
**Award:** Grant  
**Awardee:** Louisiana Department of Health and Hospitals  
 PO Box 2870, Bin 30  
 Baton Rouge, LA 70821-2870

**Status:** The PAM Project grant recipient completed their grant requirements and submitted their final report to CMS as required. ■

**Medicaid Payment Accuracy Measurement (PAM) Project—Minnesota**

**Project No:** 95-P-91685/05-02  
**Project Officer:** Wayne Slaughter  
**Period:** August, 2001 to September, 2003  
**Funding:** \$437,891  
**Principal Investigator:** Gina Kiser  
**Award:** Grant  
**Awardee:** Minnesota Department of Human Services  
 Human Services Building  
 444 Lafayette Road  
 St. Paul, MN 55155-3849

**Status:** The PAM Project grant recipient completed their grant requirements and submitted their final report to CMS as required. ■

**Medicaid Payment Accuracy Measurement (PAM) Project—Mississippi**

**Project No:** 95-P-91682/04-02  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2002 to September, 2003  
**Funding:** \$271,976  
**Principal Investigator:** Carlis Faler  
**Award:** Grant  
**Awardee:** Mississippi Office of Governor, Division of Medicaid  
 Robert E. Lee Building  
 239 North Lamar Street, Suite 801  
 Hinds County  
 Jackson, MS 39201

**Status:** The PAM Project grant recipient completed their grant requirements and submitted their final report to CMS as required. ■

**Medicaid Payment Accuracy Measurement (PAM) Project—Nebraska**

**Project No:** 95-P-91807/07-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2002 to September, 2003  
**Funding:** \$186,875  
**Principal Investigator:** Margaret (Booth) Froeschle  
**Award:** Grant  
**Awardee:** Nebraska Department of Health and Human Services, Finance and Support  
 PO Box 95026  
 Lincoln, NE 68509-5026

**Status:** The PAM Project grant recipient completed their grant requirements and submitted their final report to CMS as required. ■

**Medicaid Payment Accuracy Measurement (PAM) Project—New York**

**Project No:** 95-P-91687/02-02  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2002 to September, 2003  
**Funding:** \$225,000  
**Principal Investigator:** Judith Battison  
**Award:** Grant  
**Awardee:** New York Department of Health  
 The Riverview Center, 4th Floor,  
 150 Broadway  
 Albany, NY 12204-2719

**Status:** The PAM Project grant recipient completed their grant requirements and submitted their final report to CMS as required. ■

### Medicaid Payment Accuracy Measurement (PAM) Project—North Carolina

**Project No:** 95-P-91680/04-02  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2002 to September, 2003  
**Funding:** \$218,788  
**Principal Investigator:** Robert Nowell  
**Award:** Grant  
**Awardee:** North Carolina Department of Health and Human Services  
 2511 Mail Service Center  
 Raleigh, NC 27699-2515

**Status:** The PAM Project grant recipient completed their grant requirements and submitted their final report to CMS as required. ■

### Medicaid Payment Accuracy Measurement (PAM) Project—North Dakota

**Project No:** 95-P-91686/08-02  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2002 to September, 2003  
**Funding:** \$46,433  
**Principal Investigator:** Maggie Anderson and Sheldon Wolf  
**Award:** Grant  
**Awardee:** North Dakota  
 600 East Boulevard Avenue,  
 Department 325  
 Bismarck, ND 58505-0250

**Status:** The PAM Project grant recipient completed their grant requirements and submitted their final report to CMS as required. ■

### Medicaid Payment Accuracy Measurement (PAM) Project—Oklahoma

**Project No:** 95-P-91808/06-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2002 to September, 2003  
**Funding:** \$154,497  
**Principal Investigator:** Kelly Shropshire and Cindy Roberts  
**Award:** Grant  
**Awardee:** Oklahoma Health Care Authority  
 4545 North Lincoln Boulevard  
 Oklahoma City, OK 73105

**Status:** The PAM Project grant recipient completed their grant requirements and submitted their final report to CMS as required. ■

### Medicaid Payment Accuracy Measurement (PAM) Project—South Carolina

**Project No:** 95-P-92262/04-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$146,000  
**Principal Investigator:** Kathleen Snider  
**Award:** Grant  
**Awardee:** South Carolina Department of Health and Human Services  
 PO Box 8206  
 Columbia, SC 29202-8206

**Status:** This project is in the start-up phase. ■

### Medicaid Payment Accuracy Measurement (PAM) Project—Texas

**Project No:** 95-P-91683/06-02  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2002 to September, 2003  
**Funding:** \$153,872  
**Principal Investigator:** Aurora LeBrun and Cindy Wiley  
**Award:** Grant  
**Awardee:** Texas Health and Human Services Commission  
 PO Box 13247  
 Austin, TX 78711-3247

**Status:** The PAM Project grant recipient completed their grant requirements and submitted their final report to CMS as required. ■



**Medicaid Payment Accuracy Measurement (PAM) Project—Virginia**

**Project No:** 95-P-92271/03-01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2003 to September, 2004  
**Funding:** \$289,331  
**Principal Investigator:** Stanley Fields  
**Award:** Grant  
**Awardee:** Virginia Department of Medical Assistance Services  
 600 East Broad Street, Suite 1300  
 Richmond, VA 23219

**Status:** This project is in the start-up phase. ■

**Medicaid Payment Accuracy Measurement (PAM) Project—Washington**

**Project No:** 95-P-91681/00-02  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2002 to September, 2003  
**Funding:** \$115,268  
**Principal Investigators:** Cathy Ott and Ron Armstrong  
**Award:** Grant  
**Awardee:** Washington Department of Social and Health Services  
 PO Box 455354  
 Olympia, WA 98504-5858

**Status:** The PAM Project grant recipient completed their grant requirements and submitted their final report to CMS as required. ■

**Medicaid Payment Accuracy Measurement (PAM) Project—Wyoming**

**Project No:** 95-P-91679/08-02  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2002 to September, 2003  
**Funding:** \$50,289  
**Principal Investigator:** Teri L. Green  
**Award:** Grant  
**Awardee:** Wyoming Department of Health  
 6101 North Yellowstone Road  
 Room 259B  
 Cheyenne, WY 82002

**Status:** The PAM Project grant recipient completed their grant requirements and submitted their final report to CMS as required. ■

**Medicaid Payment Accuracy Measurement Project**

**Project No:** 500-00-0051/01  
**Project Officer:** Wayne Slaughter  
**Period:** September, 2001 to September, 2003  
**Funding:** \$856,645  
**Principal Investigator:** Paul Hogan  
**Award:** Task Order  
**Awardee:** Lewin Group  
 3130 Fairview Park Drive, Suite 800  
 Falls Church, VA 22042

**Description:** The Medicaid Payment Accuracy Measurement (PAM) Project will develop and pilot test several methodologies that CMS will use to (1) identify State-specific payment accuracy rates; (2) compare payment accuracy between States; (3) estimate payment accuracy nationally; and (4) assist with the creation of statistical sampling designs that produce statistically valid results on both macro and micro problem identification. The Payment Accuracy Rate is essential for accurately determining the extent of improper payment and in helping to determine where to invest resources to improve the payment system. Creation of statistically valid common methodologies that can be used by all States is particularly challenging. Determining whether common methodologies are feasible is a high priority for CMS and is a Government Performance and Results Act goal. In addition to researching the feasibility of common methodologies, the development of measurement tools that can be tailored to individual State programs will help reduce inaccurate payments, recover overpayments, and target reviews on the specific providers or services that are most problematic. This project identifies methodologies that are effective for States and are valid for State-to-State comparisons, and determines the feasibility of a national estimate. It begins with a pilot test with 9 States and is expected to expand to 15 States.

**Status:** The Lewin Group contract as technical consultant to the PAM Project was successfully completed for the period of 9/2001 through 9/2003; we subsequently extended this contract through 9/2004; we are currently planning to extend it again through FY 2005. ■

### Expanding Capacity for the Medical Care for Children Partnership

**Project No:** 18-P-91859/03-01  
**Project Officer:** Monica Harris  
**Period:** September, 2003 to September, 2004  
**Funding:** \$129,155  
**Principal Investigator:** Sandra Stiner Lowe  
**Award:** Grant  
**Awardee:** Medical Care for Children  
 12000 Government Center  
 Parkway  
 Fairfax, VA 22035

**Description:** This project is designed to expand the capacity of coverage for children through the Medical Care for Children Partnership (MCCP) and evaluate a new model of providing care. The standard model of service delivery through this program has been a widely dispersed network of physicians who see a small number of children for reduced fees. This model will incorporate one pediatric nurse practitioner (PNP) in a private medical group, with a bilingual medical office assistant and case manager to provide care to 500 children.

**Status:** MCCP is at the beginning stages of implementing the grant. Upon receipt of the award letter from the CMS, they began to solicit primary care medical practices through the Requests for Proposal process. The large group private pediatric medical practice that MCCP originally worked with to develop the project applied along with four other applicants. Each applicant was required to submit a technical and business proposal. A Selection Advisory Committee (SAC) reviewed all proposals. The SAC ranked and rated all the proposals. Orals were conducted with the top two offerors. Final negotiations are under way with the top offeror, a pediatric medical practice located in Springfield, Virginia. As described in the proposal, the medical practice has committed to providing a PNP, a medical office assistant, and physicians in the practice as back-up. The practice is prepared to begin seeing patients on February 1, 2004.

The case manager from MCCP has identified a pool of 264 children located in the Springfield region eligible for participation with the practice and a larger pool of over 600 children in the Alexandria area. MCCP has also developed the data collection tool to be implemented in the medical practice for tracking evaluation measures required in the grant. No funds have been drawn down to date. ■

### Improving Health Care, Child Care, Nutrition, and Income for Massachusetts

**Project No:** 18-P-91849/01-01  
**Project Officer:** Monica Harris  
**Period:** September, 2003 to September, 2004  
**Funding:** \$93,446  
**Principal Investigator:** Janet Weigel  
**Award:** Grant  
**Awardee:** Community Catalyst, Inc.  
 30 Winter Street  
 Boston, MA 02108

**Description:** This project will continue development and fully implement the RealBenefits program statewide. RealBenefits is an Internet-based eligibility screening tool for many public benefit programs. This phase of the 3-year effort will focus on recruitment of community partners, follow-up training, and support.

**Status:** Key tasks and milestones are on or ahead of schedule:

- RealBenefits was rolled out to Lighthouse Health Access Alliance (LHAA) in October. LHAA is making the application available to all health and human service agencies on Cape Cod and the Islands. Community Catalyst conducted public demonstrations to educate potential users on the Cape and followed up with a series of training sessions, involving 44 user organizations. Systematic followup with users has begun to determine if and how they are using the application.
- The Boston Public Health Commission is using RealBenefits on the Mayor's Health Line and will be training users from their Healthy Baby/Healthy Child initiative and making licenses available to the community health centers and other health and human service providers in Boston.
- In Springfield, a consortium of 15 health care agencies and community health centers will begin to use RealBenefits to screen for eligibility and produce medical program applications for patients in the first quarter of 2004.
- Followup interviews with users from each organization are planned.
- A pilot project has been established to determine what enhancements need to be added to RealBenefits to make it more useful to hospitals. A limited number of staff members from Bay State Health Center in Springfield, Cambridge Health Alliance, and Boston Medical Center will be using the tool as of February 1. Group feedback sessions will be conducted over a 6-month period.

- Demonstrations of RealBenefits are ongoing throughout Massachusetts. Milestone figures for numbers of user organizations have been surpassed. Followup work is focused on learning from users and increasing acceptance and usage within organizations.
- Efforts to engage the State of Massachusetts in supporting electronic application have proceeded more rapidly than expected. The Executive Office of Health and Human Services (EOHHS) has produced a multiphase plan to enable online applications and has promoted RealBenefits as a tool from which electronic applications will be accepted. June 2004 is the EOHHS goal for opening a gateway to accept applications produced using RealBenefits. ■

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#### Institute for End-of-Life Care

**Project No:** 18-P-91855/08-01  
**Project Officer:** Melissa Harris  
**Period:** September, 2003 to September, 2004  
**Funding:** \$496,750  
**Principal Investigator:** Bev Sloan  
**Award:** Grant  
**Awardee:** Hospice of Metro Denver  
 425 South Cherry Street, Suite 700  
 Denver, CO 80246-1234

**Description:** Hospice of Metro Denver will be designing and implementing an Institute for End-of-Life Care, a center for palliative and end-of-life care and education. This center will conduct training to health care professionals and develop palliative care models to effect more positive end-of-life outcomes.

**Status:** Grant activity is proceeding. CMS is providing technical assistance to the grantee as issues arise. ■

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#### National Pediatric Care Education Initiative

**Project No:** 18-P-91848/05-01  
**Project Officer:** Melissa Harris  
**Period:** September, 2003 to September, 2004  
**Funding:** \$347,725  
**Principal Investigator:** Jody Chrastek  
**Award:** Grant  
**Awardee:** Children Health Care, Inc.  
 2425 Chicago Avenue South  
 Mail Stop 40-300  
 Minneapolis, MN 55404

**Description:** This grant will enable Children's Hospitals and Clinics to collaborate with the National Hospice and Palliative Care Organization in providing pediatric

education services to clinicians and other providers and to serve as a model for nationwide education and consultation for providers caring for seriously ill children.

**Status:** Grant activities continue on schedule. CMS is providing technical assistance on grant issues as they arise. ■

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#### Program for All-Inclusive Care for Children and Their Families

**Project No:** 95-P-91718/03-02  
**Project Officer:** Melissa Harris  
**Period:** April, 2003 to March, 2004  
**Funding:** \$1,360,984  
**Principal Investigator:** Ann Armstrong-Dailey  
**Award:** Grant  
**Awardee:** Children's Hospice International  
 901 North Pitt Street, #230  
 Alexandria, VA 22314

**Description:** This grant is being utilized by Children's Hospice International to continue efforts begun in prior years to promote the Program of All-Inclusive Care for Children and Their Families. Funds will be awarded to a seventh State to develop a mechanism for administering this model, and additional funds will be used for technical assistance conferences and educational and evaluative materials.

**Status:** Grant activity continues on schedule. CMS is providing technical assistance as issues arise. ■

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#### Program of All-Inclusive Care for Children—Florida

**Project No:** 11-P-91167/04  
**Project Officer:** Melissa Harris  
**Period:** September, 2000 to June, 2003  
**Funding:** \$198,330  
**Principal Investigator:** Bob Maryanski  
**Award:** Grant  
**Awardee:** Florida Agency for Health Care Administration  
 2728 Fort Knox Boulevard  
 Building 3  
 Tallahassee, FL 32308

**Description:** This project is part of a CMS grant to the State for research and evaluation activities culminating in the development of a demonstration program specifically designed for improving the services available to children with life-threatening conditions and their families. The Program of All-Inclusive Care for Children (PACC) is a model of care that will be established in the State through that demonstration. PACC integrates all health care,

social services, and support services needed by families to care for children diagnosed with life-threatening and potentially life-limiting conditions. PACC provides these services at the point of diagnosis of a terminal illness and continues through the provision of bereavement counseling after the end of life.

The primary goal of the Florida program is to maintain these children in their home, which would be less costly and more likely to achieve patient and family/caregiver satisfaction. Initially, the State will pilot this project in limited geographic areas, and may limit participation in the project to children with specific life-threatening diagnoses, until Florida is able to expand the program to include all diagnoses.

**Status:** This project is completed. ■

### **MAINTAIN INDEPENDENCE AND EMPLOYMENT PROGRAM—INFRASTRUCTURE GRANTS**

The Medicaid Infrastructure Grant Program is authorized under Section 204 of the Ticket-to-Work and Work Incentives Improvement Act. The 11-year competitive grant program provides funding to States for Medicaid infrastructure development that will build supports for people with disabilities who would like to be employed. States are encouraged to use grant funding to implement and develop the optional working disabled eligibility group (Medicaid buy-in), increase the availability of statewide personal assistance services, form linkages with other State and local agencies that provide employment related supports, and create a seamless infrastructure that will maximize the employment potential of all people with disabilities.

For additional information concerning the Medicaid Infrastructure Grant Program, please visit our Web site at [www.cms.hhs.gov/twwiia](http://www.cms.hhs.gov/twwiia).

**Status:** This award is made to allow the State to develop the infrastructure that will support the development of demonstration(s). ■

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#### **Maintain Independence and Employment Program—Infrastructure Grant—Alaska**

**Project No:** 11-P-91230/00  
**Project Officer:** Jeannine Eberly  
**Period:** October, 2000 to December, 2004  
**Funding:** \$1,625,000  
**Principal Investigator:** Millie Ryan  
**Award:** Grant  
**Awardee:** Alaska Governor's Council on Disabilities and Special Education  
 PO Box 240249  
 Anchorage, AK 99524-0249

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#### **Maintain Independence and Employment Program—Infrastructure Grant—Alabama**

**Project No:** 11-P-91224/04  
**Project Officer:** Jeannine Eberly  
**Period:** October, 2000 to December, 2005  
**Funding:** \$1,625,000  
**Principal Investigator:** Patricia Harris  
**Award:** Grant  
**Awardee:** Alabama Medicaid Agency  
 Long-Term Care Division  
 501 Dexter Avenue  
 Montgomery, AL 36103-5624

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#### **Maintain Independence and Employment Program—Infrastructure Grant—California**

**Project No:** 11-P-91494/09  
**Project Officer:** Jeremy Silanskis  
**Period:** January, 2002 to December, 2005  
**Funding:** \$1,500,000  
**Principal Investigator:** Stan Rosenstein  
**Award:** Grant  
**Awardee:** California Department of Health Services  
 714/744 P Street  
 Sacramento, CA 95814

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#### **Maintain Independence and Employment Program—Infrastructure Grant—Connecticut**

**Project No:** 11-P-91231/01  
**Project Officer:** Jeremy Silanskis  
**Period:** October, 2000 to December, 2004  
**Funding:** \$1,625,000  
**Principal Investigator:** Amy Porter  
**Award:** Grant  
**Awardee:** Connecticut Department of Social Services  
 25 Sigourney Street  
 Hartford, CT 06106-5033

**Maintain Independence and Employment Program—Infrastructure Grant—Delaware**

**Project No:** 11-P-91482/03  
**Project Officer:** Jeremy Silanskis  
**Period:** January, 2002 to December, 2004  
**Funding:** \$1,000,000  
**Principal Investigator:** Joyce Pinkett  
**Award:** Grant  
**Awardee:** Delaware Health Care Commission  
 900 North Dupont Highway, Lewis Building  
 New Castle, DE 19720

**Maintain Independence and Employment Program—Infrastructure Grant—Idaho**

**Project No:** 11-P-91235/00  
**Project Officer:** Jeremy Silanskis  
**Period:** October, 2000 to December, 2002  
**Funding:** \$1,125,000  
**Principal Investigator:** Diane Yarrington  
**Award:** Grant  
**Awardee:** Idaho Department of Health and Welfare  
 3380 American Terrace, Suite 230  
 Boise, ID 83720-0036

**Maintain Independence and Employment Program—Infrastructure Grant—District of Columbia**

**Project No:** 11-P-91241/03  
**Project Officer:** Jeremy Silanskis  
**Period:** October, 2000 to December, 2005  
**Funding:** \$1,500,000  
**Principal Investigator:** Gail Smith  
**Award:** Grant  
**Awardee:** District of Columbia Department of Health, Medical Assistance Administration  
 825 North Capital Street, NW  
 Washington, DC 20002

**Maintain Independence and Employment Program—Infrastructure Grant—Iowa**

**Project No:** 11-P-91491/07  
**Project Officer:** John Young  
**Period:** January, 2002 to December, 2004  
**Funding:** \$2,867,750  
**Principal Investigator:** Eileen Creager  
**Award:** Grant  
**Awardee:** Iowa Department of Human Services  
 Hoover Building, 5th Floor  
 East 13th and Walnut Streets  
 Des Moines, IA 50319-0114

**Maintain Independence and Employment Program—Infrastructure Grant—Georgia**

**Project No:** 11-P-91240/04  
**Project Officer:** Jeremy Silanskis  
**Period:** October, 2000 to December, 2004  
**Funding:** \$625,000  
**Principal Investigator:** Fran Ellington  
**Award:** Grant  
**Awardee:** Georgia Department of Community Health  
 2 Peachtree Street, NW, 40th Floor  
 Atlanta, GA 30303-3159

**Maintain Independence and Employment Program—Infrastructure Grant—Illinois**

**Project No:** 11-P-91238/05  
**Project Officer:** John Young  
**Period:** October, 2000 to December, 2004  
**Funding:** \$2,125,000  
**Principal Investigator:** Pat Curtis  
**Award:** Grant  
**Awardee:** Illinois Department of Public Aid  
 201 South Grand Avenue East  
 Springfield, IL 62763-0001



**Maintain Independence and Employment Program—Infrastructure Grant—Illinois**

**Project No:** 11-P-91484/05  
**Project Officer:** Joseph Razes  
**Period:** January, 2002 to December, 2004  
**Funding:** \$500,000  
**Principal Investigator:** Pat Curtis  
**Award:** Grant  
**Awardee:** Illinois Department of Public Aid  
 201 South Grand Avenue East  
 Springfield, IL 62763-0001

**Maintain Independence and Employment Program—Infrastructure Grant—Kansas**

**Project No:** 11-P-91226/07  
**Project Officer:** Jeremy Silanskis  
**Period:** October, 2000 to December, 2004  
**Funding:** \$2,029,117  
**Principal Investigator:** Sharon Johnson  
**Award:** Grant  
**Awardee:** Kansas Department of Social and Rehabilitation Services  
 Docking State Office Building  
 915 SW Harrison Street  
 Topeka, KS 66612-1570

**Maintain Independence and Employment Program—Infrastructure Grant—Louisiana**

**Project No:** 11-P-91487/06  
**Project Officer:** Jeremy Silanskis  
**Period:** January, 2002 to December, 2005  
**Funding:** \$1,500,000  
**Principal Investigator:** Ruth Kennedy  
**Award:** Grant  
**Awardee:** Louisiana Department of Health and Hospitals  
 PO Box 91030  
 Baton Rouge, LA 70821

**Maintain Independence and Employment Program—Infrastructure Grant—Maine**

**Project No:** 11-P-91223/01  
**Project Officer:** John Young  
**Period:** October, 2000 to December, 2004  
**Funding:** \$2,082,963  
**Principal Investigator:** Christine Gianopoulos  
**Award:** Grant  
**Awardee:** Maine Department of Human Services  
 11 State House Station  
 Augusta, ME 04333

**Maintain Independence and Employment Program—Infrastructure Grant—Minnesota**

**Project No:** 11-P-91228/05  
**Project Officer:** Jeremy Silanskis  
**Period:** October, 2000 to December, 2004  
**Funding:** \$4,816,293  
**Principal Investigator:** MaryAlice Mowry  
**Award:** Grant  
**Awardee:** Minnesota Department of Human Services  
 Human Services Building  
 444 Lafayette Road  
 St. Paul, MN 55155-3849

**Maintain Independence and Employment Program—Infrastructure Grant—Mississippi**

**Project No:** 11-P-91782  
**Project Officer:** John Young  
**Period:** January, 2003 to December, 2003  
**Funding:** \$500,000  
**Principal Investigator:** Kenny Howard  
**Award:** Grant  
**Awardee:** Mississippi Office of the Governor  
 Division of Medicaid  
 Robert E. Lee Building  
 239 North Lamar Street  
 Suite 801, Hinds County  
 Jackson, MS 39201

**Maintain Independence and Employment Program—Infrastructure Grant—Missouri**

**Project No:** 11-P-91489/07  
**Project Officer:** John Young  
**Period:** January, 2002 to December, 2004  
**Funding:** \$1,950  
**Principal Investigator:** Sheri Taylor  
**Award:** Grant  
**Awardee:** Missouri Department of Social Services  
 615 Howerton Court  
 PO Box 6500  
 Jefferson City, MO 65102-6500

**Maintain Independence and Employment Program—Infrastructure Grant—Nevada**

**Project No:** 11-P-91233/09  
**Project Officer:** Carey Appold  
**Period:** October, 2000 to December, 2004  
**Funding:** \$2,125,000  
**Principal Investigator:** Mary Wherry  
**Award:** Grant  
**Awardee:** Nevada Department of Human Resources  
 100 East William Street, Suite 116  
 Carson, NV 89701

**Maintain Independence and Employment Program—Infrastructure Grant—Nebraska**

**Project No:** 11-P-91220/07  
**Project Officer:** Carey Appold  
**Period:** October, 2000 to December, 2004  
**Funding:** \$2,215,000  
**Principal Investigator:** Mary Jo Iwan  
**Award:** Grant  
**Awardee:** Nebraska Department of Health and Human Services  
 301 Centennial Mall South  
 5th Floor  
 PO Box 95044  
 Lincoln, NE 68509-5026

**Maintain Independence and Employment Program—Infrastructure Grant—New Hampshire**

**Project No:** 11-P-91216/01  
**Project Officer:** Jeremy Silanskis  
**Period:** October, 2000 to December, 2004  
**Funding:** \$3,010,041  
**Principal Investigator:** Denise Bouldouc-Musumeci  
**Award:** Grant  
**Awardee:** New Hampshire Department of Health and Human Services  
 105 Pleasant Street  
 Concord, NH 03301

**Maintain Independence and Employment Program—Infrastructure Grant—Nebraska**

**Project No:** 11-P-91480/07  
**Project Officer:** Joseph Razes  
**Period:** January, 2002 to December, 2004  
**Funding:** \$500,000  
**Principal Investigator:** Mary Jo Iwan  
**Award:** Grant  
**Awardee:** Nebraska Department of Health and Human Services  
 301 Centennial Mall South  
 5th Floor  
 PO Box 95044  
 Lincoln, NE 68509-5026

**Maintain Independence and Employment Program—Infrastructure Grant—New Jersey**

**Project No:** 11-P-91218/02  
**Project Officer:** Carey Appold  
**Period:** October, 2000 to December, 2004  
**Funding:** \$1,625,000  
**Principal Investigator:** William Ditto  
**Award:** Grant  
**Awardee:** New Jersey Department of Human Services  
 222 South Warren Street  
 PO Box 700  
 Trenton, NJ 08625-0700

**Maintain Independence and Employment Program—Infrastructure Grant—New Mexico**

**Project No:** 11-P-91221/06  
**Project Officer:** Jeremy Silanskis  
**Period:** October, 2000 to December, 2004  
**Funding:** \$2,124,575  
**Principal Investigator:** Gail Stefl  
**Award:** Grant  
**Awardee:** New Mexico Department of Human Services  
 Medical Assistance Division  
 2025 South Pacheco, Ark Plaza  
 PO Box 2348  
 Santa Fe, NM 87504-2348

**Maintain Independence and Employment Program—Infrastructure Grant—New York**

**Project No:** 11-P-91490/02  
**Project Officer:** John Young  
**Period:** January, 2002 to December, 2004  
**Funding:** \$1,500,000  
**Principal Investigator:** Linda LeClair  
**Award:** Grant  
**Awardee:** New York, Department of Health  
 The Riverview Center, 4th Floor  
 150 Broadway  
 Albany, NY 12204-2719

**Maintain Independence and Employment Program—Infrastructure Grant—North Dakota**

**Project No:** 11-P-91493/08  
**Project Officer:** Carey Appold  
**Period:** January, 2002 to December, 2004  
**Funding:** \$500,000  
**Principal Investigator:** Mary Mercer  
**Award:** Grant  
**Awardee:** Minot State University  
 500 University Avenue, West  
 Minot, ND 58707

**Maintain Independence and Employment Program—Infrastructure Grant—Oklahoma**

**Project No:** 11-P-91477/06  
**Project Officer:** Jeremy Silanskis  
**Period:** January, 2002 to December, 2005  
**Funding:** \$1,124,283  
**Principal Investigator:** Kelly Shropshire  
**Award:** Grant  
**Awardee:** Oklahoma Health Care Authority  
 4545 North Lincoln Boulevard  
 Oklahoma City, OK 73105

**Maintain Independence and Employment Program—Infrastructure Grant—Oregon**

**Project No:** 11-P-91219/00  
**Project Officer:** Jeannine Eberly  
**Period:** October, 2000 to December, 2004  
**Funding:** \$2,120,000  
**Principal Investigator:** Doug Stone  
**Award:** Grant  
**Awardee:** Oregon Department of Human Services  
 2575 Bittern Street, NE  
 Salem, OR 97309-0740

**Maintain Independence and Employment Program—Infrastructure Grant—Pennsylvania**

**Project No:** 11-P-91483/03  
**Project Officer:** Carey Appold  
**Period:** January, 2002 to December, 2005  
**Funding:** \$1,500,000  
**Principal Investigator:** Charles Tyrell  
**Award:** Grant  
**Awardee:** Pennsylvania Department of Public Welfare  
 PO Box 2675  
 Harrisburg, PA 17105-2675

**Maintain Independence and Employment Program—Infrastructure Grant—Rhode Island**

**Project No:** 11-P-91229/01  
**Project Officer:** Carey Appold  
**Period:** October, 2000 to December, 2004  
**Funding:** \$1,625,000  
**Principal Investigator:** Elaina Goldstein  
**Award:** Grant  
**Awardee:** Rhode Island Department of Human Services, HCQFP, Center for Adult Health  
 600 New London Avenue  
 Cranston, RI 02920

**Maintain Independence and Employment Program—Infrastructure Grant—Utah**

**Project No:** 11-P-91217/08  
**Project Officer:** John Young  
**Period:** October, 2000 to December, 2004  
**Funding:** \$2,215,000  
**Principal Investigator:** Catherine Chambless  
**Award:** Grant  
**Awardee:** Utah Department of Health  
 288 North 1460 West  
 3rd Floor  
 PO Box 143108  
 Salt Lake City, UT 84114-3108

**Maintain Independence and Employment Program—Infrastructure Grant—South Dakota**

**Project No:** 11-P-91485/08  
**Project Officer:** Carey Appold  
**Period:** January, 2002 to December, 2005  
**Funding:** \$1,500,000  
**Principal Investigator:** Grady Kickul  
**Award:** Grant  
**Awardee:** South Dakota Department of Human Services  
 East Highway 34  
 Hillsvieview Properties Plaza  
 c/o 500 East Capitol  
 Pierre, SD 57501-5070

**Maintain Independence and Employment Program—Infrastructure Grant—Virginia**

**Project No:** 11-P-91478/03  
**Project Officer:** Carey Appold  
**Period:** January, 2002 to December, 2004  
**Funding:** \$500,000  
**Principal Investigator:** Kathryn Kotula  
**Award:** Grant  
**Awardee:** Virginia Department of Medical Assistance Services  
 600 East Broad Street, Suite 1300  
 Richmond, VA 23219

**Maintain Independence and Employment Program—Infrastructure Grant—Texas**

**Project No:** 11-P-91488/07  
**Project Officer:** Jeannine Eberly  
**Period:** January, 2002 to December, 2005  
**Funding:** \$1,000,000  
**Principal Investigator:** Nora Taylor  
**Award:** Grant  
**Awardee:** Texas Health and Human Services Commission  
 PO Box 13247  
 Austin, TX 78711-3247

**Maintain Independence and Employment Program—Infrastructure Grant—Vermont**

**Project No:** 11-P-91237/01  
**Project Officer:** Jeremy Silanskis  
**Period:** October, 2000 to December, 2004  
**Funding:** \$1,125,000  
**Principal Investigator:** Peter Baird  
**Award:** Grant  
**Awardee:** Department of Aging and Disabilities  
 103 South Main Street  
 Waterbury, VT 05671

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**Maintain Independence and Employment Program—Infrastructure Grant—Washington**

**Project No:** 11-P-91232/00  
**Project Officer:** John Young  
**Period:** October, 2000 to December, 2004  
**Funding:** \$2,215,000  
**Principal Investigator:** Stephen Kozak  
**Award:** Grant  
**Awardee:** Washington Department of Social and Health Services  
 PO Box 455354  
 Olympia, WA 98504-5858

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**Maintain Independence and Employment Program—Infrastructure Grant—Wyoming**

**Project No:** 11-P-91492/08  
**Project Officer:** John Young  
**Period:** January, 2002 to December, 2004  
**Funding:** \$500,000  
**Principal Investigator:** Dave Schaad  
**Award:** Grant  
**Awardee:** Wyoming Institute for Disabilities  
 University of Wyoming  
 PO Box 3314  
 Laramie, WY 82071

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**Maintain Independence and Employment Program—Infrastructure Grant—West Virginia**

**Project No:** 11-P-91215/03  
**Project Officer:** Jeannine Eberly  
**Period:** October, 2000 to December, 2004  
**Funding:** \$2,124,994  
**Principal Investigator:** Janice Holland  
**Award:** Grant  
**Awardee:** West Virginia Division of Rehabilitation Services  
 F. Ray Power Building  
 PO Box 1004  
 Institute, WV 25112

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**Maintain Independence and Employment Demonstration—District of Columbia**

**Project No:** 11-P-91421/03  
**Project Officer:** Joseph Razes  
**Period:** January, 2002 to January, 2007  
**Funding:** \$3,980,308  
**Principal Investigator:** Steven Luzky  
**Award:** Grant  
**Awardee:** District of Columbia Department of Health, Medical Assistance Administration  
 825 North Capital Street, NW  
 Washington, DC 20002

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**Maintain Independence and Employment Program—Infrastructure Grant—Wisconsin**

**Project No:** 11-P-91227/05  
**Project Officer:** Jeremy Silanskis  
**Period:** October, 2000 to December, 2004  
**Funding:** \$2,663,935  
**Principal Investigator:** John Reiser  
**Award:** Grant  
**Awardee:** Wisconsin Department of Health and Family Services  
 1 South Pinckney Street, Suite 340  
 PO Box 340  
 Madison, WI 53701

**Description:** The Medicaid Infrastructure Grants Program enables States to build needed systems to help people with disabilities purchase health coverage through Medicaid. Grant funds assist employers to access this underused pool of workers, conduct outreach to people with disabilities, train staff in new employment possibilities, and improve transportation and other supports for people with disabilities. The goal of this grant is to support people with disabilities in securing and sustaining competitive employment in an integrated setting. The Infrastructure Grants program provides financial assistance to States through a Medicaid buy-in mechanism under the State Medicaid Plan; the ability to purchase Medicaid coverage for people with a severe impairment who do not yet meet the Supplemental Security Income disability test; significant improvements to Medicaid services that support people with disabilities in their competitive employment efforts; and/or serving as a regional State-to-State Medicaid Infrastructure Center.

**Status:** Grantee continues to populate the demonstration with enrollees and will continue to expand the number of persons in the demonstration throughout 2004. ■



### Maintain Independence and Employment Demonstration—Mississippi

**Project No:** 11-P-91175/04  
**Project Officer:** Joseph Razes  
**Period:** October, 2000 to December, 2004  
**Funding:** \$500,000  
**Principal Investigator:** Bo Bowen  
**Award:** Grant  
**Awardee:** Mississippi Office of the Governor  
 Division of Medicaid  
 Robert E. Lee Building  
 239 North Lamar Street, Suite 801  
 Hinds County  
 Jackson, MS 39201

**Description:** This project allows States to assist working individuals by providing necessary benefits and services required for people to manage the progression of their conditions and remain employed. It is a grant program established by the Ticket-to-Work and Work Incentives Improvement Act of 1999. The goal is to explore if providing health care to people earlier than traditional Medicaid rules allow will lengthen the person's work life and improve their quality of life. Outcomes to be measured include reliance on cash benefits, employment status, changes in health status, and quality of life.

The Mississippi Project uses the grant award, in conjunction with State funds, to cover persons with HIV/AIDS who work or are willing to return to work. Full Medicaid benefits and services, as well as case management is provided to the demonstration participants to ensure that they have access and coverage for medical, mental, and social support services necessary to maintain employment and their quality of life. The demonstration site is in nine counties in the Mississippi Delta where there is a relatively high rate of HIV/AIDS and limited health care resources for people with HIV/AIDS.

**Status:** The project is under way. ■

### Maintain Independence and Employment Demonstration—Rhode Island

**Project No:** 11-P-91174/01  
**Project Officer:** Joseph Razes  
**Period:** October, 2000 to December, 2004  
**Funding:** \$500,000  
**Principal Investigator:** Dianne Kayala  
**Award:** Grant  
**Awardee:** Rhode Island Department of Human Services, HCQFP, Center for Adult Health  
 600 New London Avenue  
 Cranston, RI 02920

**Description:** This project allows States to assist working individuals by providing necessary benefits and services required for people to manage the progression of their conditions and remain employed. It is a grant program established by the Ticket-to-Work and Work Incentives Improvement Act of 1999. The goal is to explore if providing health care to people earlier than traditional Medicaid rules allow will lengthen the person's work life and improve their quality of life. Outcomes to be measured include reliance on cash benefits, employment status, changes in health status, and quality of life.

The Rhode Island Project uses grant funding, in conjunction with State funds, to provide the full Medicaid benefit package, plus extra services such as targeted case management, personal assistance services, pharmaceutical co-payments, and other employment supports to individuals.

**Status:** The Rhode Island legislature failed to provide funding for this project last year. The Rhode Island legislature will meet in the spring (2002) to vote on appropriating the State match for the project. The earliest the project can begin is the fall 2002, assuming that funds are allocated for the project. ■

### Maintain Independence and Employment Demonstration—Texas

**Project No:** 11-P-91420/06  
**Project Officer:** Joseph Razes  
**Period:** January, 2002 to January, 2007  
**Funding:** \$284,253  
**Principal Investigator:** Dena Stoner  
**Award:** Grant  
**Awardee:** Texas Health and Human Services Commission  
 PO Box 13247  
 Austin, TX 78711-3247

**Description:** The Medicaid Infrastructure Grants Program enables States to build needed systems to help people with disabilities purchase health coverage through Medicaid. Grant funds assist employers to access this underused pool of workers, conduct outreach to people with disabilities, train staff in new employment possibilities, and improve transportation and other supports for people with disabilities. The goal of this grant is to support people with disabilities in securing and sustaining competitive employment in an integrated setting. The Infrastructure Grants Program provides financial assistance to States through a Medicaid buy-in mechanism under the State Medicaid Plan; the ability to purchase Medicaid coverage for people with a severe impairment who do not yet meet the Supplemental Security Income disability test; significant improvements to Medicaid services that support people with disabilities in their competitive employment efforts; and/or serving as a regional State-to-State Medicaid Infrastructure Center.

**Status:** Demonstration is not currently active. ■

#### Evaluation of the Demonstration to Maintain Independence and Employment (DMIE) and Other Related Disease-Specific 1115 Waiver Programs

**Project No:** 500-00-0046/02  
**Project Officer:** Arthur Meltzer  
**Period:** September, 2001 to September, 2006  
**Funding:** \$2,211,678  
**Principal Investigator:** Susan Haber  
**Award:** Task Order  
**Awardee:** Research Triangle Institute  
 411 Waverly Oaks Road, Suite 330  
 Waltham, MA 02452-8414

**Description:** This project evaluates several demonstrations providing supplemental Medicaid benefits to persons with HIV/AIDS who, in the absence of such benefits, may undergo a decline in functional status or be unable to gain employment or remain employed as a result of inadequate medical and ancillary care for their illness. The evaluations will assess the association between enhanced Medicaid eligibility and health care costs; changes in employment status, health status, quality of life; and other factors. The demonstrations allow States to assist working individuals by providing the necessary benefits and services required for people to manage the progression of their conditions

and remain employed and allow the Centers for Medicare & Medicaid Services to assess the impact of the provision of Medicaid benefits on extended productivity and increased quality of life. The demonstrations provide States the opportunity to evaluate whether providing such workers with early access to Medicaid services delays the progression to actual disability.

**Status:** Current enrollment in the District of Columbia (DC) Ticket-to-Work demonstration is approximately 200 persons. The contractor is designing an evaluation involving analysis of claims data and focus groups to address the issues described in the above paragraph. Enrollment in the DC 1115 program has not yet begun. Enrollment in the Mississippi Ticket-to-Work demonstration is below targeted levels and the evaluation has been scaled back. ■

#### Medicaid Buy-In Outcomes Work Incentives Systems—TWWIIA

**Project No:** 500-00-0047/03  
**Project Officer:** Joseph Razes  
**Period:** September, 2002 to September, 2004  
**Funding:** \$180,736  
**Principal Investigator:** Craig Thornton  
**Award:** Task Order  
**Awardee:** Mathematica Policy Research (DC)  
 600 Maryland Avenue, SW  
 Suite 550  
 Washington, DC 20024-2512

**Description:** This task order is to conduct an analysis of State outcomes where working individuals with disabling conditions have enrolled in a Medicaid buy-in under the Balanced Budget Act or Ticket-to-Work and Work Incentives Improvement Act. Information to be analyzed includes core data elements using administrative and population-based data sets. Specific study questions addressed are: (1) what are the outcomes for workers with disabling conditions in States that offer Medicaid coverage via a Medicaid buy-in; (2) what general observations from the data can be drawn, and what lessons have we learned from States offering Medicaid buy-ins; and (3) what additional information is needed to better assess the effectiveness of Medicaid buy-ins, and what are some of the policy implications that need further study.

**Status:** Contractor continues to conduct data analysis. ■

## Moving Toward Elimination of Lead Poisoning in High-Risk Children

**Project No:** 500-96-0012/02  
**Project Officer:** Cheryl Austein-Casnoff  
**Period:** September, 2000 to September, 2002  
**Funding:** \$749,952  
**Principal Investigator:** Penny Schafer  
**Award:** Task Order  
**Awardee:** Abt Associates, Inc.  
 55 Wheeler Street  
 Cambridge, MA 02138

**Description:** Despite a CMS (through the Medicaid program) issued guidance requiring that every child enrolled in Medicaid receive age appropriate screenings and followup, children continue to be exposed to lead and are not adequately tested. The purpose of this project is to develop a strategy to eliminate exposure to lead hazards among high-risk children by: (1) developing risk appropriate screening criteria for all children, with special emphasis on improved targeted screening of low-income children; and (2) developing an implementation plan for the elimination of lead hazards facing children, bringing together the expertise and authorities of Federal Government and appropriate State and local agencies.

**Status:** The project workplan has been developed. The staff are reviewing literature, searching relevant databases, and looking at potential model communities. ■

## Community Health Advocate Program

**Project No:** 18-C-91140/01  
**Project Officer:** Barbara Marmion  
**Period:** August, 2000 to July, 2003  
**Funding:** \$500,000  
**Principal Investigator:** Frank Robinson  
**Award:** Cooperative Agreement  
**Awardee:** Partners for a Healthier Community  
 280 Chestnut Street  
 PO Box 4895  
 Springfield, MA 01199

**Description:** This evaluation project examines the existing Community Health Advocate Program. The objective of the program is to promote innovative strategies to use lay health workers in the role of Community Health Advocates to reach vulnerable populations. The evaluation studies the effects of community-based collaborations involving

neighborhood-based nonprofit organizations, State and local public health agencies, and a neighborhood-based health center on linking families and children to a medical home for routine primary health care. It identifies groups with unusual rates of disease, studies the association between suspected risk factors, and studies this association in populations with specific characteristics. The project also uses data from the State Immunization Registry and has the potential to increase knowledge about risk factors particular to the ethnic groups living in this community and best practices for reaching similar populations who live in other communities.

**Status:** The project is awaiting a final report. ■

## Health Loop Information Project

**Project No:** 18-C-91171/04  
**Project Officer:** Nancy Olsen  
**Period:** September, 2000 to September, 2004  
**Funding:** \$896,000  
**Principal Investigator:** Robert Stolarick  
**Award:** Cooperative Agreement  
**Awardee:** Shelby County Health Care Corporation  
 d/b/a Regional Medical Center at Memphis  
 877 Jefferson Avenue  
 Memphis, TN 38103

**Description:** This project merges a patient database with a public health department's patient tracking system. The project includes staff training, software/hardware, and licensing agreements required to operate the information in the Shelby County Health Care Network, The Health Loop. The goal is to enable the Health Loop providers to provide more effective and efficient services by making primary care and public health patient information available through one information system.

**Status:** The original grant was awarded in September 2000 and reports were submitted quarterly. The continuation grant, Health Loop II, was awarded in July 2001 and a final report will be submitted upon completion of the total project. A carryover of \$225,000 was granted because Shelby County was moving into a different information technology environment and the old system would soon be obsolete. ■

### Innovative Management of Dental Decay for Young Children Enrolled in Medicaid and/or the State Children's Health Insurance Program (SCHIP)

**Project No:** 11-P-91256/09-02  
**Project Officer:** Teresa Brocato  
**Period:** September, 2001 to September, 2003  
**Funding:** \$420,000  
**Principal Investigator:** Jerry Stanger  
**Award:** Grant  
**Awardee:** California Department of Health Services  
 1501 Capitol Avenue  
 Suite 71.6086, MS 4000  
 PO Box 942732  
 Sacramento, CA 94234-7320

**Description:** This demonstration is a joint project of the California Medicaid program (MediCal) and the University of California San Francisco (UCSF) School of Dentistry designed to improve dental access for young children, reduce caries rates, and the high costs of dental care. In the target population of Alameda County, the State will conduct an outreach enrollment campaign; orient families to expectations and responsibilities; recruit, train, and certify medical and dental providers in innovative preventive and therapeutic services; and enhance Medicaid reimbursement to certified providers. Comparisons of utilization rates and expenditures will be made between the intervention population and a control group of children who are eligible for, but not enrolled in, the program.

**Status:** The California project was delayed; however, the operational phase began April 2002. ■

### Development and Evaluation of Medical Intervention for Early Childhood Caries

**Project No:** 11-P-91251/04-03  
**Project Officer:** Teresa Brocato  
**Period:** September, 2000 to September, 2003  
**Funding:** \$440,000  
**Principal Investigator:** Betty King-Sutton  
**Award:** Grant  
**Awardee:** North Carolina Department of Health and Human Services  
 2511 Mail Service Center  
 Raleigh, NC 27699-2515

**Description:** This project is aimed at training physicians and physician extenders (i.e., physician assistants, nurse practitioners) in furnishing a package of preventive dental services to both children and their caregivers in

order to reduce the incidence and transmission of dental decay in children. This innovative project effectively will expand two original, small demonstrations to the rest of the State. Three methods of training primary care providers will be tested, using a prospective, randomized study design, on the 84 largest-volume medical practices in North Carolina. These practices provide services to over 100,000 young children enrolled in Medicaid. This project will develop educational materials and track the short- and long-term effects of the education on physician knowledge and resulting dental services. Medical claims will be analyzed to compute the rates and intensity of services provided. By documenting the outcomes of these training methods in terms of their ability to deliver low-cost preventive dental services for children in the primary care setting, this project has potential to accelerate the rate of adoption, and set new standards for delivery.

**Status:** In addition to completing initial organizational activities, the project has provided training to more than 117 medical practices and 64 local health departments, and 3,326 children have received at least the initial preventive oral health service. ■

### Environmental Factors That Increase the Risk of Asthma in Medicaid Recipients

**Project No:** CMS-IA-01-128  
**Project Officer:** David Greenberg  
**Period:** September, 2001 to December, 2004  
**Funding:** \$270,000  
**Principal Investigator:** Elissa Levine  
**Award:** Interagency Agreement  
**Awardee:** National Aeronautics and Space Administration  
 Goddard Space Flight Center  
 NASA GSFC  
 Greenbelt, MD 20771

**Description:** This project involves the analysis of Maryland Medicaid data for children with asthma. It will investigate how environmental factors can help predict trends in medical service utilization by Medicaid-eligible children with asthma. Data on asthma-related inpatient medical care, outpatient medical services, and prescription medication use for children in Baltimore City will be used. Seasonal and geographic patterns in utilization will be identified. It will try to identify significant trigger variables and interpret relationships between environmental conditions and Medicaid utilization patterns.

**Status:** The project is under way. ■



### Asthma Champion Initiative

**Project No:** 18-C-91370/05-02  
**Project Officer:** David Greenberg  
**Period:** June, 2001 to December, 2004  
**Funding:** \$600,000  
**Principal Investigator:** Terrence Conway  
**Award:** Cooperative Agreement  
**Awardee:** Cook County Illinois Bureau of Health Services  
 Ambulatory Community Health Network  
 627 South Wood Street  
 Chicago, IL 60612

**Description:** This project seeks to reduce morbidity and mortality from asthma in high prevalence areas within Cook County, Illinois. Its objectives include creation of centers of clinical learning in model asthma care, training a cadre of 50 practicing providers who practice at community-based clinical centers in areas where asthma is highly prevalent; training asthma patients in self-management and appropriate drug therapies, and dissemination of language- and culturally appropriate educational materials to local health centers.

**Status:** No new funding has been made available for this project. CMS has approved a no-cost extension to enable the grantee to expend remaining funds. ■

### Access Health: A Three-Share Model—I Community Health and Coverage Project

**Project No:** 95-C-91721/05  
**Project Officer:** Al Deal  
**Period:** August, 2002 to August, 2003  
**Funding:** \$500,000  
**Principal Investigator:** Vondie Woodbury  
**Award:** Cooperative Agreement  
**Awardee:** Muskegon Community Health Project  
 565 West Western Avenue  
 Muskegon, MI 49440

**Description:** This project is a community-owned health coverage plan sold to eligible businesses in Muskegon County for the purpose of providing health care coverage to the working uninsured and their dependents. The awardee is a nonprofit entity (incorporated as a 501 [c] 3 organization) managed by a community board that oversees the enrollment and health care service delivery structure. The program is priced to appeal to small businesses that do not currently participate in the commercial health insurance market. The pricing and payment structure is designed to appeal to these targeted businesses and to broader health provider participation than conventional clinic or entitlement program models.

The type of business targeted is very small (often with fewer than four full-time employees) and pays relatively low wage rates (frequently \$6–\$12 per hour.) The Access Health program in 1999 had the stated purpose of providing an affordable health coverage product to a niche of small businesses and their employees who are able to assist in the payment of coverage but unable to participate at commercial levels. The funding comes from three sources: employer contributions (30%), employee contributions (30%), and community (40%), of which much is the locally available Disproportionate Share Hospital monies with some contributions. The current employee share is \$42 per member per month. The arrangement gives a member access to every health service available in Muskegon County. However, procedures not conducted in Muskegon County are not covered. The package includes the two local hospital systems, 200 primary care and specialty physicians, 12 community pharmacies and ancillary providers such as behavioral and mental health counseling, and hospice. The awardee claims that 97 percent of Muskegon's medical community participate in the program. They pointedly say that this is not health insurance but rather call it health coverage. The project has targeted 500 businesses and hopes to have 3,000 individuals covered. Crowd-out (an adverse incentive to a business to drop existing insurance coverage) is prevented by insisting that the business not have provided commercial coverage for the previous 12 months. This is enforced by taking only businesses with 150 employees or less that have a median wage of \$10 per hour or less. Individual members are encouraged to enroll their children in Michigan's State Children's Health Insurance Program (MICHILD) because of the richness of the benefit package. The problem that precipitated this grant request is that in their early stages of growth the pool of members is not large enough to generate a reserve from collections sufficient to meet unexpectedly costly cases. Thus, they sought this award, 75 percent of which will go into an interest-bearing risk pool. The remaining 25 percent will be used to followup on earlier surveys of the uninsured working persons in the county to assess the market penetration and current demand.

**Status:** The majority of this award goes into an interest-bearing account to serve as a risk pool. Some repeat of past data gathering will be funded with the balance with the objective of assuring the target market of small businesses is in fact being met. ■



### Cost-Effectiveness of Early Preventive Care for Children in Medicaid

**Project No:** ORDI-IM-084  
**Project Officer:** Paul Boben  
**Period:** June, 2000 to December, 2005  
**Funding:** \$0  
**Principal Investigator:**  
**Award:** Intramural  
**Awardee:**

**Description:** This project will feature a cost-benefit analysis of primary and preventive care for children up to age 2. Medicaid claims data from the State Medicaid Research Files database will be used to compare costs of care for children receiving the recommended battery of well-child visits versus those who do not. The benchmark for standard care will be the American Academy of Pediatrics' (AAP) recommended series of well-baby visits and immunizations. This study follows work by Hakim and Bye (Pediatrics, forthcoming) that showed an association between compliance with the AAP schedule and reduced risk of avoidable hospitalization.

**Status:** The project is under way. ■

### SacAdvantage Health Insurance Subsidy Program

**Project No:** I8-P-91851/09-01  
**Project Officer:** Carl Taylor  
**Period:** September, 2003 to September, 2004  
**Funding:** \$695,450  
**Principal Investigator:** Amerish Bera  
**Award:** Grant  
**Awardee:** County of Sacramento Department of Health and Human Resources  
 7001A East Parkway, Suite 500  
 Sacramento, CA 95823

**Description:** The County of Sacramento proposes a health insurance premium subsidy program for low-income employees and dependents. It has established a pilot demonstration program to address the health access needs of these individuals through a health insurance premium subsidy program called SacAdvantage. SacAdvantage utilizes the services of an existing statewide small employer health insurance purchasing pool, PacAdvantage, to provide choice of health plan simplicity of administration, and bargaining leverage in the health care market. Funds in the project will be used for direct payment of premium subsidies for qualifying low-income employees of small employers.

**Status:** Grant has been awarded for the period September 30, 2003 through September 29, 2004. ■